

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH SECRETARY

> MARK PAYNE DIRECTOR

April 4, 2018

Susan V. Kayser 1540 Broadway New York, NY 10036-4086

No Review

Record #:

2556

Facility Name:

Brookdale Churchill

FID #:

001199

Business Name:

HCP Mooresville NC OpCo, LLC

Business #:

2812

Project Description:

Change in Licensee of Brookdale Churchill Adult Care Home

County:

Iredell

Dear Ms. Kayser:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of March 12, 2018 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. This letter does not constitute approval to develop new or additional special care unit beds. You will need to demonstrate that they meet the criteria for an exception and it be granted by the Secretary of the Department of Health and Human Services.

However, you need to contact the Agency's Adult Care Licensure Section, DHSR 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

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

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,

Gregory F. Yakaboski, Project Analyst)

Project Analyst

Martha J. Frisone, Chief

Healthcare Planning and Certificate of Need Section

cc:

Adult Care Licensure Section, DHSR

Amy Craddock, Assistant Chief, Healthcare Planning, DHSR



DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH

MARK PAYNE DIRECTOR

March 29, 2018

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HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

WWW.NCDHHS.GOV TELEPHONE 919-855-3873 BUILDING • 809 RUGGLES DR Ms. Kayser March 29, 2018 Page 2

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Sincerely,

Gregory F. Yakaboski, Project Analyst)
Project Analyst

Martha J. Frisone, Chief

Healthcare Planning and Certificate of Need Section

cc: Adult Care Licensure Section, DHSR

Amy Craddock, Assistant Chief, Healthcare Planning, DHSR

Yakaboski, Greg

From:

Rosenblum, Alison T. <ATRosenblum@duanemorris.com>

Sent:

Monday, March 12, 2018 1:32 PM

To: Cc:

Yakaboski, Greg

Subject:

Kayser, Susan V. [External] Notice of Change of Ownership

Attachments:

HCP_NC_Atria Lake Norman_CON CHOW Notice and No Review Request.PDF

CAUTION: External email. Do not click links or open attachments unless verified. Send all suspicious email as an attachment to Report Spam.

Greg,

Thank you for speaking with me last week about the change of ownership notice requirements for North Carolina Adult Care Homes. As we discussed, please find attached a notice and No Review Request in connection with an anticipated change of ownership at Brookdale Churchill, an Adult Care Home located in Mooresville, NC (Iredell County). The parties anticipate that the change of ownership will occur on or about April 15, 2018, so we would greatly appreciate your review and attention to this at your earliest convenience.

Could you please confirm receipt of this email and let me know if you have any questions or require additional information? Thank you.

Best, Alison

Alison T. Rosenblum

Associate

Duane Morris LLP 30 South 17th Street Philadelphia, PA 19103-4196 **P:** +1 215 979 1995 **F:** +1 215 827 5940

ATRosenblum@duanemorris.com www.duanemorris.com

For more information about Duane Morris, please visit http://www.DuaneMorris.com

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March 12, 2018

HO CHI MINH CITY

VIA E-MAIL

Greg Yakaboski Healthcare Planning and Certificate of Need Section NC Division of Health Service Regulation 809 Ruggles Drive Raleigh, NC 27603

Re: No Review Request - Adult Care Home Change of Ownership

<u>Brookdale Churchill, 140 Carriage Club Drive, Mooresville, NC 28117</u>

Dear Mr. Yakaboski:

On behalf of HCP Mooresville NC OpCo, LLC (the "Applicant"), we are writing to provide notice and make a "No Review Request" in connection with an upcoming change of ownership at Brookdale Churchill, the Adult Care Home, license number HAL-049-029, located at the above-referenced address (the "Adult Care Home"). The Adult Care Home is located in Iredell County.

On or about April 15, 2018, the ownership of the operations of the Adult Care Home will transfer from Emeritus Corporation (the "Current Licensee") to the Applicant. The owner of the real property on which the Adult Care Home is located, HCP Eden2 A Pack, LLC (the "Real Property Owner") will not change. In connection with the change of ownership, the lease currently in place between the Real Property Owner and the Current Licensee will be terminated and the Real Property Owner will enter into a new lease agreement with the Applicant. A copy of the current license as well as before-and-after organizational charts are enclosed.

The Applicant intends to submit a Change Licensure Application for Adult Care Facilities to the Adult Care Licensure Section later this week. As the parties expect the change of ownership to occur on or about April 15, 2018, we greatly appreciate your prompt attention to

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Duane Morris

March 12, 2018 Page 2

this matter. Please do not hesitate to let me know if you have any questions or require additional information.

Very truly yours,

Aush blayser /ATK Susan V. Kayser

SVK Enclosures

cc: Tracy A. Porter, Esq. (w/Enclosures, via E-mail)

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

Effective January 1, 2018, this license is issued to **Emeritus Corporation** to operate an Adult Care Home known as Brookdale Churchill

> located at 140 Carriage Club Drive Mooresville, NC, Iredell County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall expire December 31, 2018.

License Number: HAL-049-029

*** This home serves only elderly persons. ***

Capacity: 120

Special Care Units: X Yes _ No

Type:

Alzheimer's/Dementia 20

Authorized, by:

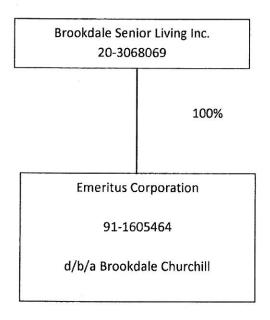
Secretary, N.C. Department of Health and

Human Services



Director, Division of Health Service Regulation

Brookdale Churchill Current Organizational Structure



Atria Lake Norman

(currently Brookdale Churchill)

Post-CHOW Legal Entity Ownership Structure

