

ROY COOPER . Governor MANDY COHEN, MD, MPH · Secretary MARK PAYNE . Director

## VIA EMAIL ONLY

July 12, 2018

Marisa Barone Mbarone@wakehealth.edu

## **Exempt from Review**

Record #:

2651

Facility Name:

North Carolina Baptist Hospital

FID#:

943495

**Business Name:** 

North Carolina Baptist Hospital

Business #:

1819

Project Description:

Renovate the 11th floors of the Ardmore Tower West, Ardmore Tower

East and North Tower, and the 10th floor of Ardmore Tower West, on the

NCBH main campus

County:

Forsyth

Dear Ms. Barone:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of July 9, 2018, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(g). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

However, you need to contact the Agency's Construction and Acute and Home Care 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 by you. 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 the Agency. 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.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

Ms. Barone July 12, 2018 Page 2

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

Sincerely,

Celia C. Inman Project Analyst

Martha J. Frisone

Chief, Healthcare Planning and Certificate of Need Section

cc:

lpitman@wakehealth.edu

Construction Section, DHSR

Acute and Home Care Licensure and Certification Section, DHSR Melinda Boyette, Program Assistant, Healthcare Planning, DHSR



July 9, 2018

Ms. Martha Frisone, Chief
Ms. Celia Inman, Project Analyst
Healthcare Planning and Certificate of Need Section
Division of Health Service Regulation
2704 Mail Service Center
Raleigh, NC 27699-2704



Re:

North Carolina Baptist Hospital (FID # 943495 Lic # H0011) Request for Confirmation on CON Exemption, Renovations to 11 Ardmore Tower West, 11 Ardmore Tower East, 11 North Tower, and 10 Ardmore Tower West

Dear Ms. Frisone and Ms. Inman,

Pursuant to N.C.G.S. § 131E-184(g), Exemptions from Certificate of Need Review, I am writing to request confirmation that the project described below for North Carolina Baptist Hospital ("NCBH") is exempt from review.

NCBH intends to renovate the 11<sup>th</sup> floor of Ardmore Tower West (ATW), the 11<sup>th</sup> floor of Ardmore Tower East (ATE), the 11<sup>th</sup> floor of North Tower (NT), and the 10<sup>th</sup> floor of ATW. These floors currently comprise 39 licensed general acute care, 16 licensed pediatric psychiatry, and 26 unlicensed observation beds, distributed as follows:

Table 1 Current Bed Type and Count

11 ATE, 11 ATE, 11 NT, and 10 ATW

11 ATW	13 Licensed General Acute Care Beds
11 ATE	26 Licensed General Acute Care Beds
11 NT	26 Unlicensed Observation Beds
10 ATW	20 Licensed Pediatric Psychiatry Beds

As discussed in the exemption letter filed by NCBH on May 29, 2018 and approved by the Agency on June 6, 2018 (Exemption Record #2598; Exhibit 1), the 39 licensed acute care beds from 11 ATW and 11 ATE will be relocated to the 8<sup>th</sup> and 11<sup>th</sup> floors of Reynolds Tower (RT). The newly renovated 8 and 11 RT will include an additional 16 licensed general acute care beds that will be relocated from the 2<sup>nd</sup> Floor of the Sticht Center (SC). A portion of the licensed pediatric psychiatry beds on 10 ATW (16 of the 20) will be relocated to 2 SC and the remaining four beds will be relocated to the Ground Floor of ATW. This project is expected to be complete in October 2018. Upon completion of this project 11 ATW, 11 ATE, 11 NT, and



10 ATW will be vacant. The table below illustrates the relocations described in Exhibit 1 and shows the net impact on the licensed general acute care and pediatric psychiatry beds.

Table 2
Licensed Acute Care and Pediatric Psychiatry Beds on Impacted Units
Current State & October 2018

	Licensed Gen A	Cute Care Beds on	Impacted Units	Licensed Ped Psych Beds on Impacted		
	Current	Oct 2018	Difference	Current	Oct 2018	Difference
11 ATW	13	Q	-13	0	7	omerence
11 ATE	26	Q	-26	0	<u> </u>	0
11 NT	0	0	n	0		
2 SC	16	0	-16	0	<u>U</u>	0
8 RT	0	27	+27		16	+16
11 RT	0	28		u	0	0
10 ATW	0	20	+28	0	0	0
	0	U	0	20	0	-20
G ATW	0	0	0	0	4	+4
Total	55	55	0	20	20	

The need for renovations to 11 ATW, 11 ATE, 11 NT, and 10 ATW are a result of Wake Forest Baptist Medical Center (WFBMC) master facility planning, which concluded in the Spring. Renovations are required for the following reasons:

### 11 Ardmore Tower West

This unit is being renovated to modernize the facility and accommodate 19 unlicensed observation beds. Renovations for this unit also include the development of four unlicensed minor procedure rooms. These changes are required in response to WFBMC master facility planning.

### 11 Ardmore Tower East/11 North Tower

These units are being renovated for the relocation and expansion of the NCBH neonatal intensive care unit (NICU). The existing NCBH NICU consists of an open bay unit that does not meet modern standards and codes. The new NICU on 11 ATE/11 NT will consist of all private rooms with the exception of two rooms that will be available for twins. This modernization of the NICU will improve patient and family experience as well as patient safety. At project completion, the units will include 53 licensed general acute beds in 51 rooms. These beds will be relocated from 6 ATE, the current NICU location, and 8 RT.

### 10 Ardmore Tower West

This current location of pediatric psychiatry is being renovated to support licensed general acute care beds. Pediatric psychiatry will be relocated to 2 SC and G ATW as these locations represent a better physical location for psychiatric services. At project completion, this unit will include 30 licensed general acute care beds. These beds will be relocated from 8 and 11 RT.



This project is expected to be complete in June of 2019. The tables below illustrate the relocations of the impacted units and explain the final usage of each unit upon project completion in June 2019. Exhibit 2 includes a NCBH bed stacking diagram which outlines all current and planned locations of all NCBH licensed beds.

Table 3
Licensed General Acute Care Beds on Impacted Units
Current State, October 2018, & June 2019

	Current	Oct 2018	June 2019	Difference (June 2019-Oct 2018)	June 2019 Unit Function
11 ATW	13	0	0	0	Unlicensed Observation Unit
11 ATE	26	0	24	+24	NICU
11 NT	0	a	29	+29	NICU
2 SC	16	0	0	0	Pediatric Psychiatry Unit
8 RT	0	27	0	-27	Unlicensed Observation Unit
11 RT	0	28	0	-28	Unlicensed Observation Unit
6 ATE	28	28	0	-28	Decommissioned and Closed
10 ATW	0	0	30	+30	Licensed General Acute Care Unit
Total	83	83	83	0	

Table 4
Licensed Pediatric Psychiatry Beds on Impacted Units
Current State. October 2018. & June 2019

	Current	Oct 2018	June 2019	Difference (June 2019-Oct 2018)	June 2019 Unit Function
2 SC	0	16	16	+16	Pediatric Psychiatry Unit
10 ATW	20	0	0	-20	Licensed General Acute Care Unit
G ATW	0	4	4	+4	Ped Psych / Clinical Decision Unit
Total	20	20	20	0	

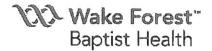
NCBH believes this project is exempt from review, as described below. Pursuant to N.C.G.S. § 131E-184(g):

"The Department shall exempt from certificate of need review any capital expenditure that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176 (16) b. if all of the following conditions are met:

(1) The sole purpose of the capital expenditure is to renovate, replace on the same site, or expand the entirety or a portion of an existing health service facility that is located on the main campus.

The sole purpose of the renovations to 11 ATW, 11 ATE, 11 NT, and 10 ATW are to renovate a portion of an existing health service facility, NCBH. All units are located on the NCBH main campus.

Pursuant to N.C.G.5. § 131E-176(14n), "Main campus" means all of the following for the purposes of G.S. 131E-184 (f) and (g) only:



- a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
- b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building.

Exhibit 3 includes a campus map of NCBH and outlines the locations of Ardmore Tower, North Tower, and the offices of the Chief Executive Officer and Chief Financial Officer, who are responsible for financial and administrative control over NCBH. As illustrated on the map, all units are located on the NCBH main campus.

(2) The capital expenditure does not result in (i) a change in bed capacity as defined in G.S. 131E-176(5) or (ii) the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b.

The capital expenditure for renovating 11 ATW, 11 ATE, 11 NT, and 10 ATW does not result in a change in bed capacity as defined in G.S. 131E-176(5) or in the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b. Upon completion of the renovation, B3 licensed general acute care beds will be relocated to the units being renovated. The locations from which the licensed beds will relocated will be utilized as outlined in column five of Tables 3 and 4.

N.C.G.S. 131E-176(5) defines change in bed capacity as:

(i) any relocation of health service facility beds, or dialysis stations from one licensed facility or campus to another, or (ii) any redistribution of health service facility bed capacity among the categories of health service facility bed as defined in G.S. 131E-176(9c), or (iii) any increase in the number of health service facility beds, or dialysis stations in kidney disease treatment centers, including freestanding dialysis units.

This project does not involve (i) a relocation of health service facility beds from one licensed facility or campus to another, or (ii) a redistribution of health service facility bed capacity among the categories of health service facility beds as defined in G.S. 131E-176(9c), or (iii) an increase in the number of health service facility beds.

NCBH is licensed for 802 general acute care beds. See Exhibit 4 for the NCBH hospital license. NCBH is not proposing that any of its licensed beds be relocated to another facility or campus, be redistributed, or be increased. At the close of this project, NCBH will continue to be licensed for 802 general acute care beds and 44 psychiatric beds. The physical location of the beds will change as outlined in Tables 3 and 4 and Exhibit 2, however all relocations will occur within the NCBH main campus.

The only other possible new institutional health service which could be applicable to this project is major medical equipment (see N.C.G.S. § 131E-176(16)p.), which is defined in N.C.G.S. § 131E-176 (140) as

Medical Center Boulevard Winston-Salem, NC 27157 www.WakeHealth.edu



a single unit or single system of components with related functions which is used to provide medical and other health services and which costs more than seven hundred fifty thousand dollars (\$750,000). In determining whether the major medical equipment costs more than seven hundred fifty thousand dollars (\$750,000), the costs of the equipment, studies, surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the major medical equipment shall be included. The capital expenditure for the equipment shall be deemed to be the fair market value of the equipment or the cost of the equipment, whichever is greater. Major medical equipment does not include replacement equipment as defined in this section.

As part of this project, NCBH does not intend to purchase any single piece of equipment which costs more than \$750,000, including surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the medical equipment for this project.

(3) The licensed health service facility proposing to incur the capital expenditure shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.

NCBH respectfully requests that the CON Section confirm that, based on the facts stated above as well as the information included in the Exhibits, the NCBH Renovation of 11 ATW, 11 ATE, 11 NT, and 10 ATW t meets all of the exemption criteria in N.C.G.S. § 131E-184(g).

Please let me know if you have any questions or if additional information is needed.

Sincerely,

Marisa Barone

Senior Planning Manager

Wake Forest Baptist Medical Center

### Index of Exhibits

- 1 Exemption for Renovations to 8 and 11 RT
- 2 NCBH Bed Plans
- 3 NCBH Campus Map
- 4 NCBH License



ROY COOPER . Governor MANDY COHEN, MD, MPH . Secretary MARK PAYNE . Director

VIA EMAIL ONLY

June 6, 2018

Marisa Barone Mbarone@wakehealth.edu

**Exempt from Review** 

Record #:

2598

Facility Name:

North Carolina Baptist Hospital

FID#:

943495

Business Name:

North Carolina Baptist Hospital

Business #:

Project Description:

Renovate the 8th and 11th floors of Reynolds Tower on the NCBH main campus

County:

Forsyth

Dear Ms. Barone:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency). determined that based on your letter of May 29, 2018, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(g). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

However, you need to contact the Agency's Construction and Acute and Home Care 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 by you. 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 the Agency. 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.

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

Sincerely,

Celia C. Inman

Project Analyst

Chief, Healthcare Planning and Certificate of Need Section

cc:

lpitman@wakehealth.edu

Construction Section, DHSR

Acute and Home Care Licensure and Certification Section, DHSR Amy Craddock, Assistant Chief, Healthcare Planning, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIVISION OF HEALTH SERVICE REGULATION HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

> LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603 MAILING ADDRESS: 2704 Mail Service Center, Raleigh, NC 27699-2704 www.ncdhhs.gov/dhsr/ • TEL: 919-855-3873



May 29, 2018

Ms. Martha Frisone, Chief
Ms. Celia Inman, Project Analyst
Healthcare Planning and Certificate of Need Section
Division of Health Service Regulation
2704 Mail Service Center
Raleigh, NC 27699-2704



Strategic and Eusinest Planning

Medical Center Boulevard Winston-Salem, MC 27157 p.336.716.509 f.336.716.2879 ljotman@wak.el-ealth.edu www.WakeHealth.edu

Re: North Carolina Baptist Hospital (FID # 943495 Lic # H0011) Request for Confirmation on CON Exemption

— Renovations of the 8th and 11th floors of Reynolds Tower

Dear Ms. Frisone and Ms. Inman,

Pursuant to N.C.G.S. § 131E-184(g), Exemptions from Certificate of Need Review, I am writing to request confirmation that the project described below for North Carolina Baptist Hospital ("NCBH") is exempt from review.

NCBH intends to renovate the 8th and 11th floors of Reynolds Tower, located on the NCBH main campus. These floors are currently vacant and are being renovated due to antiquated facilities that do not meet current standards. Renovations will include:

- Sprinkling of both the 8th and 11th floors of Reynolds Tower
- Air handler addition to service half of Reynolds Tower
- Upgrades of mechanical, electrical, and plumbing systems on both the 8th and 11th floors of Reynolds
   Tower
- Updates to all finishes on the 8th and 11th floors of Reynolds Tower

At completion of the project, 28 licensed general acute care beds and one unlicensed observation bed will be located on the 8<sup>th</sup> floor of Reynolds Tower and 27 licensed general acute care beds will be located on the 11<sup>th</sup> floor of Reynolds Tower will also include five outpatient infusion chairs.

The 55 licensed acute care beds that will be located on the 8th and 11th floors of Reynolds Tower will be relocated from the units outlined in the table below. The table below also notes how the units will be used upon the relocation of the licensed general acute care beds.

Table 1
Licensed Acute Care Bed Relocations

Unit Location	Licensed General Acute Care Bed Count	Post Relocation Usage of Unit
11th Floor Ardmore Tower East	26 Beds	Unit will be decommissioned and closed.
11th Floor Ardmore Tower West	13 Beds	Unit will be decommissioned and closed.
2 <sup>nd</sup> Floor Sticht Center	16 Beds	Pediatric Psychiatric Beds will be moved from the 10 <sup>th</sup> floor of Ardmore Tower West to the 2 <sup>nd</sup> Floor Sticht Center. The 10 <sup>th</sup> Floor of Ardmore Tower West will be decommissioned and closed.

Exhibit 1 includes an NCBH Bed Stacking Diagram which outlines in detail the current location of all licensed general acute care beds, the future location of all licensed general acute care beds upon completion of this project, and from which units bed relocations will occur.

NCBH believes this project is exempt from review, as described below. Pursuant to N.C.G.S. § 131E-184(g):

"The Department shall exempt from certificate of need review any capital expenditure that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176 (16) b. if all of the following conditions are met:

(1) The sale purpose of the capital expenditure is to renovate, replace on the same site, or expand the entirety or a portion of an existing health service facility that is located on the main compus.

The sole purpose of the renovations to the 8th and 11th floors of Reynolds Tower are to renovate a portion of an existing health service facility, NCBH. The 8th and 11th floors of Reynolds Tower are located on the NCBH main campus.

Pursuant to N.C.G.S. § 131E-176(14n), "Main campus" means all of the following for the purposes of G.S. 131E-184 (f) and (g) only:

- a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
- b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building.

Exhibit 2 includes a campus map of NCBH and outlines the locations of Reynolds Tower and the offices of the Chief Executive Officer and Chief Financial Officer, who are responsible for financial and administrative control over NCBH. As illustrated on the map, Reynolds Tower is located on the NCBH main campus.

(2) The capital expenditure does not result in (i) a change in bed capacity as defined in G.S. 131E-176(5) or (ii) the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b.

The capital expenditure for renovating the 8th and 11th floors of Reynolds Tower does not result in a change in bed capacity as defined in G.S. 131E-176(5) or in the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b. The capital expenditure involves renovation of vacated units. Upon completion of the renovation, 55 licensed general acute care

beds will be relocated to the 8th and 11th floors of Reynolds Tower from the 11th floor of Ardmore Tower East (26 beds), the 11th floor of Ardmore Tower West (13 beds), and the 2nd Floor of the Sticht Center (16 beds). The vacated spaces will either be decommissioned or converted as outlined in Table 1 and Exhibit 1.

N.C.G.S. 131E-176(5) defines change in bed capacity as:

(i) any relocation of health service facility beds, or dialysis stations from one licensed facility or compus to another, or (ii) any redistribution of health service facility bed capacity among the categories of health service facility bed as defined in G.S. 131E-276(9c), or (iii) any increase in the number of health service facility beds, or dialysis stations in kidney disease treatment centers, including freestanding dialysis units.

This project does not involve (i) a relocation of health service facility beds from one licensed facility or campus to another, or (ii) a redistribution of health service facility bed capacity among the categories of health service facility beds as defined in G.S. 131E-176(9c), or (iii) an increase in the number of health service facility beds.

NCBH is licensed for 802 general acute care beds. See Exhibit 3 for the NCBH hospital license. NCBH is not proposing that any of its licensed beds be relocated to another facility or campus, be redistributed, or be increased. At the close of this project, NCBH will continue to be licensed for 802 general acute care beds. The physical location of the beds will change as outlined in Table 1 and Exhibit 1, however all relocations will occur within the NCBH main campus.

The only other possible new institutional health service which could be applicable to this project is major medical equipment (see N.C.G.S. § 131E-176(16)p.), which is defined in N.C.G.S. § 131E-176 (140) as

a single unit or single system of components with related functions which is used to provide medical and other health services and which costs more than seven hundred fifty thousand dollars (\$750,000). In determining whether the major medical equipment costs more than seven hundred fifty thousand dollars (\$750,000), the costs of the equipment, studies, surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the major medical equipment shall be included. The capital expenditure for the equipment shall be deemed to be the fair market value of the equipment or the cost of the equipment, whichever is greater. Major medical equipment does not include replacement equipment as defined in this section.

As part of this project, NCBH does not intend to purchase any single piece of equipment which costs more than \$750,000, including surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the medical equipment for this project.

(3) The licensed health service facility proposing to incur the capital expenditure shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.

NCBH respectfully requests that the CON Section confirm that, based on the facts stated above as well as the information included in the Exhibits, the NCBH 8<sup>th</sup> and 11<sup>th</sup> Floor Reynolds Tower Renovation Project meets all of the exemption criteria in N.C.G.S. § 131E-184(g).

Please let me know if you have any questions or if additional information is needed.

Sincerely,

Marisa Barone

Senior Planning Manager

Wake Forest Baptist Medical Center

#### INDEX OF EXHIBITS

- 1. Bed Stacking Diagram
- 2. Campus Map
- 3. NCBH License

Exhibit 1: Bed Stacking Diagram

		C	urtent	Post R	Net Change	
dalding	Floor	Unit Mame	Literated General Acute Care Bods	Mait Name	Ukensed eneral Acute Care Bade	(Post Renavas of
	1	1 Vereni	0	New Unit	28	
		Ormopedics	20	Orthopedics	20	28
Revnolds Tower		Trauma/Gen Surg	25	Trauma/Gen Surre	25	0
		Mich		New Unit	27	0
leynolds Tawer		Carnalogy	25			27
		CATEBIO; V	24	Condisiony	25	0
1		CT/Vescuter		IMC	24	0
1		MICU	23	CT/Vascular .	23	0
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1	17	Day Mospical	0	Closed	0	0
ļ		Pieroc/Burn	24	Plastic/Gum	24	0
1		Hospitaliat/Badge	14	Hospitalist/Bodge	14	0
		Neph/Hemo	19	Neph/Hemo	19	Ó
North Tower	The state of the s	CA-ICA	22	CA-ICA	2.2	0
1		Numeral IAAC	12	Neonatal NVC	12	0
1		PSCC	B	PSCC	8	0
L		Trauma (CU(5b)	11	Trouma (CU(5b)	11	0
	4	MICU(4ab)	22	MICU(40b)	22	0
L	11	Sept Park		15078		
	10	Gen Med	26	Gen Med	26	0
[	9	Hospitalist	24	Mospitalist	24	0
rtimore Tower	8	Gen Med/Hosp	25	Gen Med/Hosp	26	0
£ası	7	Conditionary Invest	28	Cardiology Inter	28	D
	6	HICU	28	MICU	28	0
	5	Neurosuren	26	Meuropunery	26	0
		Neurology/EMIU	73	Neurology/EMU	23	0
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		Peds HampOns	32	Peds HemoOnc	32	
drmore Tower		Peds	28	Peds		0
West		CUltric	0	Olinic	28	0
***** F		PICU/Pads IMC	26			0
-		August 1		PICU/Peds BAC	26	D
}-		Coth Lobs	24 D	Neuro ICU Cath Labs	24	0
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	d	Surgical Oncology	40			
-		OndCU/SMT		Surgical Oncology	40	
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		Oncology	40	Oncology	40	0
ancer Center	THE RESERVE THE PARTY OF THE PA	Onsole ty	40	Oncology	40	D
-		Day Hospital	0	Day Hospitol	0	0
	5	Wannen's	19	Women's	19	0
OF SHAREST	E ASSESSED		The same of the sa			
		Rehab	0	Refrab	0	0
_	25A	Charles Manager	PARTIE AND DESCRIPTION OF THE PARTIES.	Pasition	C C	-10
ucm Center	258		16	ACE	16	Ö
		Adult Psych	0	Adult Psych	0	0
	158	Vacant	0	Vacant	0	0

CONTRACTO Audiminum Babcock Employee Parking Hawthorne Rd. Employee Parting Hanes Bildg. Progressive Care Bidg. Nutrition Blog. Employee Parliding Ronald McDenald House Gray Bldg. Westington TSI-CRU Reynolds Brenner Children's Hospital North Tower Moeds Hall WRI Center Ardinore Tower POSTER omprehensive Cancer Contor Beach St Location of CEO and CFO offices 60 Patient Drop-off/ \$@@ Cancer Center Valet parking Choreidale pare Medical Sueen St. 000 Patient & Visitors (formerly CompRehab Plaza) Parking Docks Medical Plaza-Miller A, 8, & C Patient Drop-off/Valet Parking: Brenner Children's Hospital Ardmore Tower Reynolds Tower Janeway Tower 000 Main Entrance North Tower Sticht Center Miller St.

Exhibit 2: NCBH Campus Map



Effective January 01, 2018, this license is issued to North Carolina Baptist Hospital

to operate a hospital known as

North Carolina Baptist Hospital
located in Winston Salem, North Carolina, Forsyth County.

This license is issued subject to the statutes of the

State of North Carolina, is not transferable and shall remain
in effect until amended by the issuing agency.

Facility ID: 943495
License Number: H0011

Bed Capacity: 885

General Acute 802, Rehabilitation 39, Psych 44,

Dedicated Inputiont Surgical Operating Rooms;
Dedicated Ambulatory Surgical Operating Rooms:

Shared Surgical Operating Rooms: 38
Dedicated Endoscopy Rooms: 10

Authorized by:

Secretary, N.C. Department of Health and Human Services

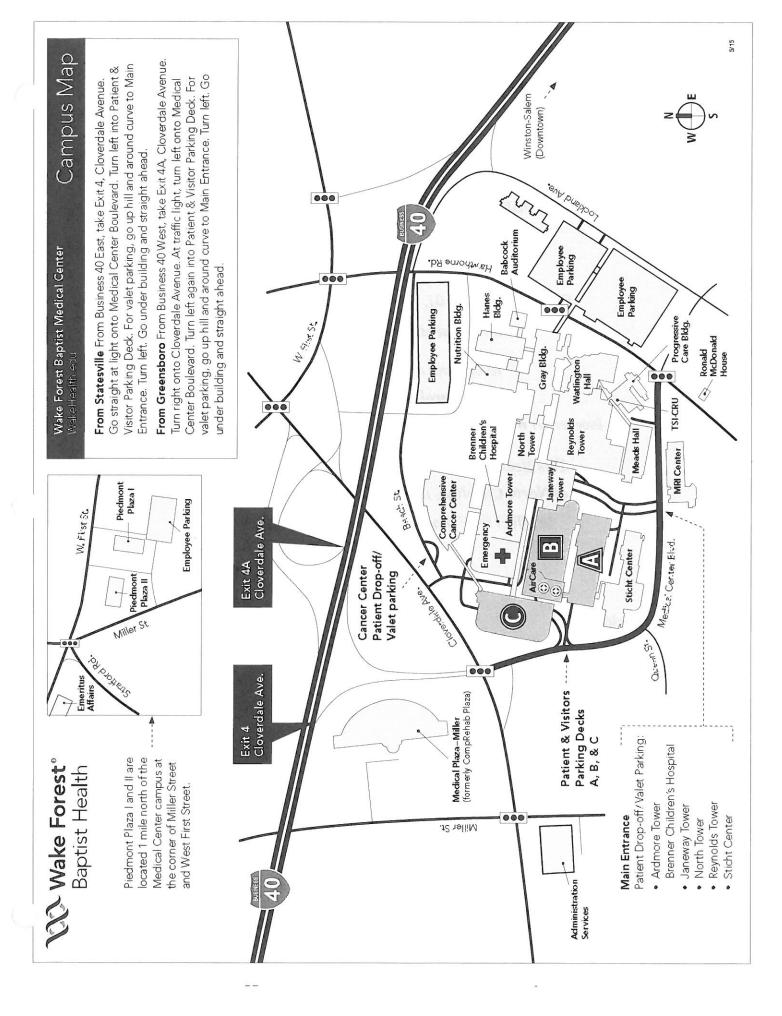
Director, Division of Health Service Regulation

		Current		Octo	ber 2018	Jun	e 2019	Net Lhange
Aulirling	Feor	Unit Name	Licensed General Acute Care Beds	Unit Name	Licensed General Acute Care Beds	Unit Name	Licensed General Acute Care Beds	(Post Renovation Gurrent)
		1 Vacarit	0	New Unit	28	@bservation Unit	0	-23
		0 Orthopedics	20	Orthopedics	20	Orthopedics	20	0
		9 I rai ma/Gen Surg	25	I racma/Gen Surg	25	I rauma/Gen Surg	25	0
		8 Vacaril	0	New Unit	27	Cibservation Unit	0	-27
eynnids Tower		7 Cardinlogy	25	Cardiningy	25	Cardiningy	25	0
		6 IM:	24	IMI	24	IM:	24	0
	100	5 CI, Vascular	23	CI, Vascular	23	CI, Vascular	23	0
		4 MICU	24	MICU	24	MICU	24	0
	\$15.5 m24	CAN BE SHOULD BE	900 SM 1800 MA	NAME OF STREET			Constitution of the second	
	-	LL Day Hospital	0	Cosed	0	רביומ	29	29
		0 Plastic/Burn	24	Plastic/Burn	24	Plastic/Bum	24	0
		9 Hospitalist/Badge	14	Hospitalist/Badge	_4	Hospitalist/Badge	14	0
		8 Nenh/Hemn	19	Nenh/Hemo	19	Nenh/Hemn	19	0
North Tower		7 CV-ICU	22	CV-ICU	22	CV-ICU	22	0
WOTERT TOWER		6 Ne onatal IMC	12	Neonatal IMC	<u></u>	Ne onatal IMC	12	0
		6 PSCC	8	PSCC	8	PSCC	8	0
		5 Trauma ICI I(5h)	11	Trauma ICI (5h)		Trauma ICI (5h)	- 11	0
		4 Mici (4ah)	22	MICH(4ah)	22	MICH(4ah)	22	0
45 to 10 V 4 N	N M SANGE	4 (1011)		IVIK 11(4AII)	Market Market San	IVIK 3 I(4 MI)		NAME OF THE OWNER, OF THE OWNER, OF THE OWNER, OF THE OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER, OWNER,
		LI Gen Med	26	Cosed	0	Cosed	24	24
		0 Gen Med	26	Gen Med	26	Gen Med	26	0
		9 Hospitalst	24	Hospitalist	24	Hospitalst	24	0
rdmore Tower	1	8 Gen Med/Ensp	26	Gen Med/Ensp	26	Ger Med/Ensp	26	0
East		7 Cardiningy Inter	28	Cardinlogy inter	28	Cardiningy inter	28	0
		6 NI W	28	NICU	28	NICU	0	-23
		5 Neurusurgery	26	Neurosurgery	26	Neurosurgery	26	0
		4 Neurology/FMII	23	Neumingy/FMII	23	Neurology/FMI1	23	0
						MARKET AND STREET		STATE STATE OF
		LL Swirg	19	Cosed	0	Observation Unit	0	0
		10 Pets Psych	0	Cosed	0	New Unit	30	30
		9 Peds Hemotinc	32	Peds Hemolinc	32	Peds Hemotine	32	0
drmore Tower		8 Pecs	28	Pecs	28	Pecs	28	0
West		7 Clinic	0	Clinic	0	Clinic	0	0
		6 PICU/Peds MC	26	PICU/Peds MC	26	PICU/Peds MC	26	0
		5 Neuro ICU	24	Neuro ICU	24	Neuro ICU	24	0
		4 Cath Labs	0	Cath Labs	0	Cath Labs	0	0
30.01 23		9 Surgical Oncology	40	Surgical Oncology	40	Surgical Oncology	40	0
		8 On-ICH/BMT	28	On-ICH/BMT	28	On-ICH/BMT	28	0
nmnrehersive		7 Onrology	40	Oncology	40	Oncology	40	0
description of the same of			-10		10	Onrology	40	0
Cancer Center		6 Onrology		Onrolegy	0	Day Hospital	0	0
		5 Day Hospital	0	Day Hospital			19	0
1 6 7 2 10 10 10	IS A DOME	5 Women's	19	Wom en's	PASSASSAS PARA	Women's		
THE GAR SE	TOTAL CONTRACTOR	3 Rahab	0	Ra hab	0	Rahab	0	0
	25	SA Joints	16	Peris Psych	0	Peris Psych	0	0
Sticht Center		SBACE	16	ACE	16	ACE	16	0
		SA Adult Ps/ch	0	Artuit Psych	0	Artuit Ps/rh	0	0
		SB Vacarit	0	Vacant	0	Vacant	0	0
	_ ,	- start		122011	The state of the s		THE RESERVE AND PARTY OF THE	STATE OF THE PARTY

802 0

SIDE MARKETINE	A PARTY OF	Current		October 2018		June 2019		Net Lhange
Rullding	Floor	Unit Name	Licensel Pysidistry Beds	Unit Name	Liversed Pysidistry Beds	Unit Name	Timesel Pysidistry Beds	(Post Renovation - Ourcent)
	1	11 Vacaril	0	New Unit	0	Observation Unit	0	0
		10 Orthopedics	0	Orthopedics	0	Orthopedics	0	0
		9 I rauma/Gen Surg	0	I rauma/Gen Surg	0	I rauma/Gen Surg	0	0
		8 Vacarit	0	New Unit	0	Observation Unit	0	0
eynolds Tower		7 Cardiningy	0	Cardinlegy	0	Cardinlegy	0	0
		6 IM:	0	IM:	0	IM:	0	0
		5 CI, Vascular	0	CI,Vascular	0	CI,Vascular	0	0
		4 MICU	0	MICU	0	MICU	0	0
	3123							
		LT Day Hospital	0	C osed	0	NIC	0	0
		10 Plastic/Burn	0	Plastic/Burn	0	Plastic/Bum	0	0
	0.000	9 Hospitalist/Badge	0	Hospitalist/Badge	0	Hospitalist/Badge	0	0
		8 Nenh/Hemn	0	Neah/Hemn	0	Nenh/Hemn	0	0
North Tower		7 CV-ICU	0	CV-ICU	0	CV-ICU	0	0
		6 Ne onatal IMC	0	Neonatal Mic	0	Ne onatal IMC	0	0
		6 PSCC	0	PSCC	0	PSCC	0	0
		5 Trauma ICI I(5h)	0	Trauma (CJ (5h)	0	Trauma ICI I(5h)	0	0
		4 MICH(4ah)	0	MICI ((4ah)	0	MICH(4ah)	0	0
		11 Gen Med	0	Cosed	0	Cosed	0	0
		10 Gen Med	0	Gen Med	0	Gen Med	0	0
		9 Hospitalst	0	Hospitalist	0	Hospitalst	0	0
Ardmore Towe		8 Gen Med/Hosp	0	Gen Med/Ensp	0	Ger Med/Ensp	0	0
East		7 Cardiningy Inter	0	Cardiningy inter	0	Cardiningy inter	0	0
		6 NIW	0	UDIN	0	NICU	0	0
		5 Neurosurgery	0	Neurosurgery	0	Neurosurgery	0	0
		4 Neurology/FMII	0	Neumingy/FMII	0	Neurology/FMII	0	0
PARTY NEWS								THE PERSON
		II Swirg	0	Cosed	0	Observation Unit	0	0
		10 Peris Psych	20	© osed	0	New Unit	0	0
		9 Peds Hemotinc	0	Peds Hemo Inc	0	Peds Hemotine	0	0
Adrmore Tower		8 Pecs	0	Pecs	0	Pecs	0	0
West		7 Clinic	0	dinic	0	Clinic	0	0
		6 PICU/Peds MC	0	PICU/Peds MC	0	PICU/Peds MC	0	0
		5 Neuro ICU	0	Neuro ICU	0	Neuro ICU	0	0
		4 Cath Labs	0	Cath Labs	0	Cath Labs	0	0
	Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner,	רמא פ	0	CDI / Ped Psych	4	CDI / Ped Psych	4	0
		ole and other design	ALCO CONTRACTOR		l o	Surgical Oncology	0	1 0
		9 Surgical Cincology	0	Surgical Concellingy	0	Oncicu/BM1	0	0
		8 Onticu/BMT	0	Onticu/BMH			0	0
Comprehersive		7 Unrology	0	Oncolegy	0	Uncology	0	0
Cancer Center	-	6 Onrology	0	Onrolegy	0	Oncology	0	0
		5 Liay Hospital 5 Women's	0	Day Hospital Women's	0	Day Hospital Women's	0	0
	1300 Sp. 000	Shauchile	U	Innovition 2		Inanius 12		
THE RESERVE	THE PARTY OF	3 Rehab	0	Rahab		Rahab	0	0
		SA Joints	0	Peds Psych	16	Peds Psych	16	0
Sticht Center		SB ACE	0	ACE	0	ACE	0	0
addit delicer	<u> </u>	SA Adult Parh	21	Artuit Psych	21	Adult Ps/ch	21	0
		ISB Vacant	0	Vacant	0	Vacant	0	0
				T- acait		1	_	NAME OF TAXABLE PARTY.

Lotal Pyschiatry Beds: 14 44 44 0



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

Effective January 01, 2018, this license is issued to North Carolina Baptist Hospital

to operate a hospital known as North Carolina Baptist Hospital located in Winston Salem, North Carolina, Forsyth County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall remain in effect until amended by the issuing agency.

> Facility ID: 943495 License Number: H0011

Bed Capacity: 885

General Acute 802, Rehabilitation 39, Psych 44,

**Dedicated Inpatient Surgical Operating Rooms: Dedicated Ambulatory Surgical Operating Rooms:** 

36

**Shared Surgical Operating Rooms: Dedicated Endoscopy Rooms:** 

Authorized by:

Secretary, N.C. Department of Health and

**Human Services** 



Director. Division of Health Service Regulation

All responses should pertain to October 1, 2016 through September 30, 2017

License No: H0011 Facility ID: 943495

E.	Reimbursement Source.	(For "Inpatient Days,"	"show Acute Inpatient Days only, excluding normal newborn	ns.)
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Campus - if multiple sites:

Primary Payer Source	Inpatient Days of Care (total should be the same as D.1.a - q total on p. 6)	Emergency Visits (total should be the same as G.3.b. on p. 8)	Outpatient Visits (excluding Emergency Visits and Surgical Cases)	Inpatient Surgical Cases (total should be same as 9.d. Total Surgical Cases-Inpatient Cases on p. 12)	Ambulatory Surgical Cases (total should be same as 9.d. Total Surgical Cases-Ambulatory Cases on p. 12)
Self Pay/Indigent/Charity	12,854	16 665	50,537	850	1097
Medicare & Medicare Managed Care	103,445	23,542	333,749	6,257	5754
Medicaid	61,314	34,721	149.877	2211	200 Jan 3926
Commercial Insurance	1/43	699	6.614	108	(23
Managed Care	44, 261	22,051	322,019	4050	7998
Other (Specify)	11, 239	5052	27,872	956	1105
TOTAL	1 223,774	104730	890,670	14 392	Sondo

## F. Services and Facilities

1. Obstetrics	Enter Number of Infants
a. Live births (Vaginal Deliveries)	5
b. Live births (Cesarean Section)	WH 16
c. Stillbinths	1

d. Delivery Rooms - Delivery Only (not Cesarean Section)	N
e. Delivery Rooms - Labor and Delivery, Recovery	
f. Delivery Rooms - LDRP (include in Item "D.1.m" on Page 6)	
g. Normal newborn bassinets (Level 1 Neonatal Services) Do not include in section "D. Beds by Service" on Page 6	0

2.	<b>Abortion Services</b>	Number of procedures per Year	4	
		(Feel free to footnote the type of abortion procedures	reported)	

All responses should pertain to October 1, 2015 through September 30, 2016.

License No: H0011
Facility ID: 943495

## E. Swing Beds

Number of Swing Beds *	0	
Number of Skilled Nursing days in Swing Beds	0	

<sup>\*</sup> in a hospital designated as a swing-bed hospital by CMS (Centers for Medicare & Medicaid Services)

F. Reimbursement Source (For "Inpatient Days," show Acute Inpatient Days only, excluding normal newborns.)

Campus – If multiple sites:

Primary Payer Source	Inpatient Days of Care (total should be the same as D.1.a - q total on p. 6)	Visits (total should be the same as G.3.b. on p. 8)	Outpatient Visits (excluding Emergency Visits and Surgical Cases)	Inpatient Surgical Cases (total should be same as 9.d. Total Surgical Cases-Inpatient Cases on p. 12)	Ambulatory Surgical Cases (total should be same as 9.d. Total Surgical Cases-Ambulatory Cases on p. 12)
Self Pay/Indigent/Charity	14,476	19.514	52,457	917	1,034
Medicare & Medicare Managed Care	102,579	23,462	301262	6.141	5,721
Medicaid	49 990	37,758	142,111	2,067	3,914
Commercial Insurance	650	635	6,383	67	ille
Managed Care	44.407	23,585	322.101	4,462	8.193
Other (Specify)	10,112	4.842	24,190	981	947
TOTAL	224,214	109.796	848,504	14,534	19,928

## G. Services and Facilities

1. Obstetrics	Enter Number of Infants
a. Live births (Vaginal Deliveries)	2
b. Live births (Cesarean Section)	6
c. Stillbirths	

d. Delivery Rooms - Delivery Only (not Cesarean Section)	
e. Delivery Rooms - Labor and Delivery, Recovery	
f. Delivery Rooms – LDRP (include Item "D.1.m" on Page 6)	
g. Normal newborn bassinets (Level I Neonatal Services)  Do not include with totals under the section entitled Beds by Service (Inpatient)	

2.	<b>Abortion Services</b>	Number of procedures per Year	3	
		(Feel free to footnote the type of abortion procedures	reported)	

Revised 8/2016

All responses should pertain to October 1, 2014 through September 30, 2015.

License No: H0011 Facility ID: 943495

D. Beds by Service (Inpatient) continued

Number of Swing Beds *	
Number of Skilled Nursing days in Swing Beds	
Number of unlicensed observation beds	49

<sup>\*</sup> means a hospital designated **as a swing-bed hospital** by CMS (Centers for Medicare & Medicaid Services)

# E. Reimbursement Source (For "Inpatient Days," show Acute Inpatient Days only, excluding normal newborns.)

Primary Payer Source	Inpatient Days of Care (total should be the same as D.1.a – q total on p. 6)	Visits (total should be the same as F.3.b. on p. 8)	Outpatient Visits (excluding Emergency Visits and Surgical Cases)	Inpatient Surgical Cases (total should be same as F.8.d. Total Surgical Cases-Inpatient Cases on p. 12)	Ambulatory Surgical Cases (total should be same as F.8.d. Total Surgical Cases-Ambulatory Cases on p. 12)
Self Pay/Indigent/Charity	12,714	19,725	53.821	845	11/6
Medicare & Medicare Managed Care	100,766	22,936	278,037	6,097	5482
Medicaid	50,030	37,724	139 058	2120	3837
Commercial Insurance	2,322	923	9,829	96	199
Managed Care	45,619	23.191	305,456	4197	8034
Other (Specify)	9,177	4,446	19,5%	858	880
TOTAL	220,088	108,945	805,747	14,214	19,548

### F. Services and Facilities

1. Obstetrics	Enter Number of Infants
a. Live births (Vaginal Deliveries)	ک
b. Live births (Cesarean Section)	7.
c. Stillbirths	

d. Delivery Rooms - Delivery Only (not Cesarean Section)	0
e. Delivery Rooms - Labor and Delivery, Recovery	0
f. Delivery Rooms – LDRP (include Item "D.1.m" on Page 6)	0
g. Normal newborn bassinets (Level I Neonatal Services)  Do not include with totals under the section entitled Beds by Service (Inpatient)	6

2.	<b>Abortion Services</b>	Number of procedures per Year	1	
		(Feel free to footnote the type of abortion procedures r	eported)	

e a