



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

ROY COOPER • Governor  
MANDY COHEN, MD, MPH • Secretary  
MARK PAYNE • Director, Division of Health Service Regulation

January 22, 2019

James Eubanks  
P.O. Box 609  
Lexington, SC 29071

**No Review**

**Record #:** 2840  
**Facility Name:** Medi Home Hospice  
**FID #:** 041396  
**Business Name:** MSA Home Health and Hospice of NC, Inc.  
**Business #:** 2313  
**Project Description:** Expand geographic service area to Harnett County  
**County:** Robeson

Dear Mr. Eubanks:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence 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 that correspondence is not governed by, and therefore, does not currently require a certificate of need. 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.

You may need to contact the Agency's Acute and Home Care Licensure and Certification Section, DHSR to determine if they have any requirements for development of the proposed project.

This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office.

Please do not hesitate to contact this office if you have any questions.

Sincerely,

Fatimah Wilson  
Team Leader

Martha J. Frisone, Chief  
Healthcare Planning and Certificate of Need Section

cc: Acute and Home Care Licensure and Certification Section, DHSR  
Melinda Boyette, Administrative Assistant, 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: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704  
www.ncdhhs.gov/dhsr • TEL: 919-855-3873

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# Corporate Headquarters



January 17, 2019

Ms. Martha Frisone  
Chief, Certificate of Need Section  
Division of Health Service Regulation  
NC Department of Health & Human Services  
2704 Mail Service Center  
Raleigh, North Carolina 27699-2704



**Re: Expanded Geographic Service Area**

**Site: MSA Home Health and Hospice of NC, Inc.**  
**DBA: Medi Home Hospice**  
**4242 Fayetteville Rd**  
**Lumberton, NC 28358-2605**

**TIN: 474993299**  
**NPI: 1831634179**  
**License: HOS2861**  
**Facility ID: 041396**

Dear Ms. Frisone:

Please accept this letter as notification to North Carolina Department of Health and Human Services, Division of Health Service Regulation, Certificate of Need Section that MSA Home Health and Hospice of NC, Inc., a North Carolina corporation and wholly owned subsidiary of Medical Services of America, Inc., intends to expand its geographic service area to Harnett County, NC. Under this expansion, there will be no changes to the agency's physical location or the addition of new branch or satellite offices. The only significant change is the agency will begin staffing cases in counties contiguous to its original footprint as outlined below:

**Current Service Area:** Robeson, Bladen, Columbus, Cumberland, Hoke, Scotland

**Expanded Service Area:** Robeson, Bladen, Columbus, Cumberland, Hoke, Scotland, **Harnett**

Expansion notification has been provided to the Acute and Home Care Licensure and Certification Section and subsequently approved. The approval letter is enclosed for reference.

At this time, we request confirmation the aforementioned expansion is exempt from CON review.

Please do not hesitate to contact me via phone (803-957-0500 x6886) or email (licensing@msa-corp.com) with questions.

Kindest regards,

James Eubanks  
Managed Care Contract Analyst

Enclosure

171 Monroe Lane • Lexington, SC 29072 • P.O. Box 609 (29071-0609)  
PHONE (803) 957-0500 • FAX (803) 358-5741

## MEDICAL SERVICES OF AMERICA, INC.

www.MedicalServicesofAmerica.com



NC DEPARTMENT OF  
**HEALTH AND  
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**ROY COOPER** • Governor  
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January 16, 2019

James Eubanks  
Medi Home Hospice  
P.O. Box 609  
Lexington, SC 9071-0609

Re: Expanded Geographic Service Area

Site: Medi Home Hospice (**HOS2861**)  
4242 Fayetteville Road  
Lumberton, NC 28358-2605

Dear Mr. Eubanks:

This is to acknowledge receipt of your letter to extend the geographic service area of the above agency to the following area(s): **Harnett County**.

This office will approve the following requested geographic service area expansion for the above hospice care agency(s): **Harnett County**.

***Please be advised that the North Carolina Rules Governing the Licensure of Hospice Agencies are implicit in that the proposed expanded service area(s) continue to meet the intent of the rules, i.e., supervision and adequate staffing.***

On-site monitoring will be conducted at the discretion of this office. Please continue to provide this office with advance written notification with an effective date for future geographic service area expansions.

If we can be of further assistance to you regarding this process, please call our office at (919)855-4620.

Sincerely,

*Inga Gaines*

Inga Gaines  
Acute and Home Care Licensure and Certification Section  
cc: SA file

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION**

**ACUTE AND HOME CARE LICENSURE AND CERTIFICATION SECTION**  
LOCATION: 1205 Umstead Drive, Lineberger Building, Raleigh, NC 27603  
MAILING ADDRESS: 2712 Mail Service Center, Raleigh, NC 27699-2712  
www.ncdhhs.gov/dhsr/ • TEL: 919-855-4620 • FAX: 919-715-3073

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