

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

May 16, 2019

James C. Wrenn, Jr. 111 Gilliam Street Oxford, NC 27565

No Review

Record #:

2936

Facility Name:

Magnolia House Retirement Center

FID #:

950864

Business Name:

RCTG, LLC

Business #:

3029

Project Description:

Change in licensee

County:

Lee

Dear Mr. Wrenn:

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 Adult Care Licensure Section 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,

Bernetta Thorne-Williams

Project Analyst

Martha J. Frisone, Chief

Healthcare Planning and Certificate of Need Section

cc: Adult Care Licensure Section, 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

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James C. Wrenn, Jr. Gerald T. Koinis

C. Gill Frazier, II

N. Kyle Hicks

111 Gilliam Street Oxford NC 27565

May 6, 2019

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 martha.frisone@dhhs.nc.gov

Ms. Bernetta Thorne-Williams Project Analyst NC Division of Health Service Regulation Healthcare Planning and Certificate of Need Section 809 Ruggles Drive Raleigh, NC 27603 Bernetta. Williams@dhhs.nc.gov

Via email and overnight delivery

Re: Magnolia House Retirement Center

AL's Line of Care Inc

1115 Carthage Street; Sanford, NC 27330

License Number: HAL-053-026

Dear Ms. Frisone and Ms. Thorne-Williams:

I represent Sanford Health Care, LLC ("SHC"). SHC currently owns that real property constituting the existing health service facility licensed as an adult care home known as Magnolia House Retirement Center (Licensee: AL's Line of Care Inc.; Address: 1115 Carthage Street, Sanford, NC 27330 (Lee County); License Number: HAL-053-026) (the "Facility"). AL's Line of Care Inc., the existing licensee, intends to relinquish operation of the Facility on or before May 31, 2019 and RCTG, LLC, an entity with the same owners as SHC, plans to assume operations

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once a Change Ownership Application is approved by the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Adult Care Licensure Section ("ACLS"). Thereafter, RCTG, LLC will operate the Facility and SHC will continue to own the real property and will operate the Facility. The Facility will continue to be known as Magnolia House Retirement Center.

Pursuant to G.S. §131D-184(a)(8), I understand that this transaction is exempt from review and, as a result, we request that you confirm that understanding by providing us with a "no review" letter.

As always, thank you for your assistance.

James C. Wrenn, Jr.

JCWjr/aee