

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

September 30, 2019

Greg Gaylis Arnall Golden Gregory, LLP 171 17th Street NW, Suite 2100 Atlanta GA 30363-1031

No Review

Record #:

3061

Facility Name:

Carillon Assisted Living of Garner

FID #:

160385

Business Name:

GAHC3 Garner NC TRS Sub, LLC

Business #:

3105

Project Description:

Change in operator of the facility

County:

Wake

Dear Mr. Gaylis:

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,

Project Analyst

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 https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873



Atlanta Office 171 17th Street NW, Suite 2100 Atlanta, GA 30363-1031 Direct phone: 404.873.8170 Direct fax: 404.873.8171

E-mail: greg.gaylis@agg.com

September 18, 2019

VIA FEDERAL EXPRESS

Ms. Martha Frisone NC Division of Health Service Regulation Certificate of Need Section 809 Ruggles Drive Raleigh, NC 27603

Re: NC Adult Care Home: Operator Ownership Change

FID #

160385 Carillon Assisted Living of Garner, LLC d/b/a Carillon Assisted Living of Garner 200 Minglewood Drive, Garner, North Carolina 27529

License Number: HAL-092-208

Dear Ms. Frisone:

This letter is to inform you of a proposed change in ownership involving the above-referenced facility (the "Facility"). The proposed change will result in GAHC3 Garner NC TRS Sub, LLC becoming 3105 the new operator of the Facility, and Carillon Assisted Living of Garner, LLC will relinquish operations of the Facility. Please also note that there will be no change to the real estate owner of the Facility. GAHC3 Garner NC ALF, LP.

It is our understanding that the proposed change described above does not require any additional filings and we respectfully request the issuance of an "Exemption or No Review Letter" confirming our understanding.

Thank you for your attention to this matter. If you have any questions or require any additional information, please do not hesitate to contact me.

Sincerely,

Arnall Golden Gregory LLP

Greg Gavlis

Enclosures

Hedy S. Rubinger, Esq. CC:

state of Anth Carolina Springs Department of Health and Human Services Division of Health Service Regulation

Effective January 1, 2019, this license is issued to Carillon Assisted Living of Garner, LLC to operate an Adult Care Home known as Carillon Assisted Living of Garner

> located at 200 Minglewood Drive Garner, NC, Wake County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall expire December 31, 2019.

License Number: HAL-092-208

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

Capacity: 84

Special Care Units: X Yes No

Type:

Alzheimer's/Dementia 48

Authorized, by:

Secretary, N.C. Department of Health and

Human Services



Director, Division of Health Service Regulation