



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

**ROY COOPER • Governor**  
**KODY H. KINSLEY • Secretary**  
**MARK PAYNE • Director, Division of Health Service Regulation**

VIA EMAIL ONLY

December 16, 2022

Joel L. Johnson  
[jljohnson@williamsmullen.com](mailto:jljohnson@williamsmullen.com)

**Exempt from Review – Acquisition of Facility**

**Record #:** 4078  
**Date of Request:** October 26, 2022  
**Facility Name:** Glenbridge Health and Rehabilitation  
**Type of Facility:** Nursing Home  
**FID #:** 923186  
**Acquisition by:** Glenbridge Health and Rehabilitation SNF, LLC  
**Business #:** 3646  
**County:** Watauga

Dear Mr. Johnson:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that the project described above is exempt from certificate of need (CON) review in accordance with G.S. 131E-184(a)(8). Therefore, the above referenced business may proceed to acquire the health service facility identified above without first obtaining a CON. The Agency's determination is limited to the question of whether the above referenced business would have to obtain a CON if the current owners of the health service facility do in fact sell it to the business listed above. Note that pursuant to G.S. 131E-181(b): "*A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.*"

If the business listed above does acquire the facility, you should contact the Agency's Nursing Home Licensure and Certification Section to obtain instructions for changing ownership of the existing facility.

It should be noted that this Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this Agency and a separate determination regarding whether a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Ena Lightbourne  
Project Analyst

Micheala Mitchell  
Chief

cc: Nursing Home Licensure and Certification 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

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Re: [External] CHOW Notification - Glenbridge Health & Rehabilitation [WMIMAN-IWOVRIC.FID2471730]

LE

Lightbourne, Ena

To:

- Johnson, Joel <jljohnson@williamsmullen.com>

Cc:

- Stancil, Tiffany C

Wed 10/26/2022 11:52 AM

Received. Thank you.

**Ena Lightbourne**

Certificate of Need, Project Analyst

Division of Health Service Regulation, Healthcare Planning and Certificate of Need Section (*Currently, I am in the office on Thursdays and Fridays. For the rest of the week, I can be reached by email.*)

NC Department of Health and Human Services

Office: 919-855-4610

[Ena.lightbourne@dhhs.nc.gov](mailto:Ena.lightbourne@dhhs.nc.gov)

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**From:** Johnson, Joel <jljohnson@williamsmullen.com>  
**Sent:** Wednesday, October 26, 2022 11:42 AM  
**To:** Lightbourne, Ena <ena.lightbourne@dhhs.nc.gov>  
**Cc:** Tiffany.C.Hunt@dhhs.nc.gov <Tiffany.C.Hunt@dhhs.nc.gov>  
**Subject:** [External] CHOW Notification - Glenbridge Health & Rehabilitation [WMIMAN-IWOVRIC.FID2471730]

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Dear Ms. Lightbourne:

I am writing to notify the Certificate of Need Section regarding an upcoming change of ownership in the facility located at 211 Milton Brown Heirs Rd, Boone, NC 28607, scheduled to occur on

November 15, 2022 from Glenbridge Health and Rehabilitation Center LLC (Nursing Home License No.: NH 0400) to Glenbridge Health and Rehabilitation SNF LLC d/b/a Glenbridge Health and Rehabilitation.

The CHOW application is being submitted to Qwonthafia Jones in the Licensure and Certification Section.

If you have any questions, please e-mail or call me.

**WILLIAMS  
MULLEN**

Joel L. Johnson

*Attorney*

T 919.981.4082 | C 919.360.7727

[email](#) | [v-card](#) | [website](#) | [LinkedIn](#)

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