Name: Moriah Specht, N.P.

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To whom it may concern,

On behalf of Gibson Care Inc. dba Home Instead, we are submitting this letter with the intent to affirm the need that Home Instead will be asking for to expand their scope of practice. I understand that Home Instead is seeking to apply for a certificate of need for the Iredell and Alexander counties to add home health division.

I attest that Home Instead is warranted in asking for this need for the above-mentioned counties. I understand that many of Home Instead 's clients come to them with needs of basic home health duties such as oxygen modality management, wound care and medication management.

These are needs that I feel Home Instead can and will adequately care for when granted this certificate of need based on Home Instead's 21-year outstanding reputation within our community. Home Instead has modeled expert care in both Iredell and Alexander counties aging population and I feel this would only expand on the trusted care our communities have come to know and appreciate from this already well established Home Care agency.

Thank You,

Moriah Specht, N.P.