



NC DEPARTMENT OF  
**HEALTH AND  
 HUMAN SERVICES**  
 Division of Health Service Regulation

**ROY COOPER** • Governor  
**MANDY COHEN, MD, MPH** • Secretary  
**MARK PAYNE** • Director

**Current Compliance Information**

**To:** LME/MCO Director  
**From:** DHSR Mental Health Licensure and Certification Section  
**Re:** Facility Compliance Information

Facility Name: \_\_\_\_\_ MHL Number: \_\_\_\_\_  
 Licensee Name: \_\_\_\_\_  
 DHSR Reviewer: \_\_\_\_\_ Date of Review: \_\_\_\_\_

The compliance information below is associated with a **facility**, not an entire agency or an individual associated with an agency or facility. This list includes active and current actions; it does not include previous administrative actions. If a facility has no current or active administrative actions, they will have no findings listed below. This does not mean there are no deficiencies associated with this facility.

Action	Date	Status of Appeal (if applicable)

The information above is limited to the following administrative actions:

- Active Type A or Imposed Type B
- Current Intent to Revoke: the Intent to Revoke is active and has not been rescinded.
- Active Suspension of Admissions: the Suspension of Admissions has not been lifted.
- Active Summary Suspension: the Summary Suspension was issued and has not been lifted.
- Active Notice of Revocation: the Notice of Revocation is current, and may be in appeal.
- Revocation in Effect: a Notice of Revocation was issued and the final outcome is that the license for this facility has been revoked and is no longer active.

For additional information, please contact the team leader for the territory in which this facility resides. Staff contacts are listed on our webpage below or you can contact our main office for that information.

**Staff Contacts Webpage:** <http://www.ncdhhs.gov/dhsr/mhlc/mhstaff.html>

**Main Office Phone #:** 919-855-3795

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION  
 MENTAL HEALTH LICENSURE AND CERTIFICATION SECTION**

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