

North Carolina Department of Health and Human Services Division of Health Service Regulation

Pat McCrory Governor Richard O. Brajer Secretary DHHS

Mark Payne, Director Health Service Regulation

RESPONSE REQUIRED

November 23, 2016

Charles Hauser 3825 Forrestgate Drive Winston-Salem, NC 27103

Conditional Approval

G-11200-16
Piedmont Stone Center
Acquire an additional mobile lithotripter
Forsyth
060074

Dear Mr. Hauser:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) has conditionally approved the above referenced certificate of need application. This decision was made after a review of the applications submitted for this cycle and after consideration of the Certificate of Need Law, G.S. 131E-175 et. seq. and regulations promulgated there under, the State Medical Facilities Plan, and other applicable information. Written notice of all findings and conclusions upon which the decision was based will be provided to the applicants within five business days after the date of the decision in accordance with G.S. 131E-186. The applicant shall not proceed with the construction, offering or development of this project until the certificate of need is issued. Further, the Agency shall not issue the certificate of need until all applicable conditions of approval that can be satisfied before as a follows:

- 1. Piedmont Stone Center, PLLC shall materially comply with all representations made in the certificate of need application.
- 2. Piedmont Stone Center, PLLC shall acquire no more than one mobile lithotripter for a total of no more than five mobile lithotripters upon completion of this project.



- 3. Piedmont Stone Center, PLLC shall not acquire, as part of this project, any equipment that is not included in the project's proposed capital expenditures in Section VII of the application and that would otherwise require a certificate of need.
- 4. Piedmont Stone Center, PLLC shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Certificate of Need Section in writing prior to issuance of the certificate of need.

Response to the above conditions should be submitted to the Agency no later than 35 days from the date of the decision. Failure to respond within this time period may result in the CON Section making a determination not to issue a certificate of need for the project referenced above.

The conditional approval is valid only for a capital expenditure of \$1,368,634. If a cost overrun occurs that exceeds the approved capital expenditure amount, a new certificate of need may be required as determined by G.S. 131E-176(16)(e).

The applicant should be aware that according to the Certificate of Need Law any affected person shall have thirty (30) days after the date of decision to file a petition for a contested case on this approval. Further, if you are aggrieved by the conditions of the decision you may file a petition for a contested case hearing in accordance with G.S. 150B, Article 3, as amended. This petition must be filed with the Office of Administrative Hearings, P.O. Drawer 27447, Raleigh, North Carolina 27611-7447 within thirty (30) days of the date of this decision. [Note: Effective October 1, 2009, OAH requires a filing fee with submittal of petitions for contested cases. Please direct all questions regarding this fee to OAH Clerk's Office (919-431-3000).]

G.S. 150B-23 provides that a party filing a petition must also serve a copy of the petition on all parties to the petition. Therefore, if you file a petition for a contested case hearing, you must serve a copy of the petition on the Department of Health and Human Services by mailing a copy of your petition to:

Lisa G. Corbett Department of Health and Human Services, Office of Legal Affairs, Adams Building – Room 154 2001 MSC Raleigh, North Carolina, 27699-2001

It is requested that a copy of the petition also be served on the Agency.

The certificate of need will not be issued before the completion of this 30 day period ending **December 28, 2016**. If a contested case request is received within the thirty (30) day period, the certificate will not be issued until the appeal is resolved (10A NCAC 14C .0208).

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The timetable for completion of the project is the timetable outlined in the certificate of need application, unless an adjustment has been made by the Agency because the review period was extended. The timetable for this project is as follows:

Ordering Equipment	February 1, 2017
Operation of Equipment	October 1, 2017

If the decision is appealed, the timetable set forth in this letter will be adjusted accordingly before the certificate of need is issued. Please contact us if any clarification of this decision is required.

Please refer to the Project ID # and Facility ID # (FID) in all correspondence.

Sincerely,

Tanya S. Rupp Project Analyst Martha J. Frisone Assistant Chief, Certificate of Need

Attachment

cc: Construction Section, DHSR Acute & Home Care Licensure & Certification Section, DHSR Paige Bennett, Assistant Chief, Healthcare Planning, DHSR

CERTIFICATE OF SERVICE

I hereby certify that I have served the foregoing notice of **conditional approval** on the following person(s) by placing a copy in an official depository of the United States Postal Service in a postage-paid, first class envelope(s) addressed as follows:

Charles Hauser 3825 Forrestgate Drive Winston-Salem, NC 27103 Project ID #: G-11200-16 FID #: 060074

I hereby certify that I have served the foregoing notice of **disapproval** on the following person(s) by placing a copy in an official depository of the United States Postal Service in a postage-paid, first class envelope(s) addressed as follows:

David Driggs 440 Savannah Way Franklin, TN 37067 Project ID #: J-11201-16 FID #: 160294

This the 23rd day of November, 2016.

Tanya S. Rupp Project Analyst, Certificate of Need