



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

Pat McCrory
Governor

Richard O. Brajer
Secretary DHHS

Drexdal Pratt
Division Director

VIA EMAIL ONLY

November 12, 2015

Joy Heath
Williams Mullen

Exempt from Review – Acquisition of Facility

Record #: 1785
Facility Name: Davie County Home Health Agency
Type of Facility: Home Health Agency
FID #: 943723
Acquisition by: Well Care Home Health, Inc.
Business #: 2318
County: Davie

Dear Ms. Heath:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your letter of November 9, 2015, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(8). Therefore, Well Care Home Health, Inc. may proceed to acquire the above referenced health service facility without first obtaining a certificate of need. However, you need to contact the Agency's Acute and Home Care Licensure and Certification Section to obtain instructions for changing ownership of the existing facility. 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.*"

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



Healthcare Planning and Certificate of Need Section

www.ncdhhs.gov

Telephone: 919-855-3873 • Fax: 919-715-4413

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

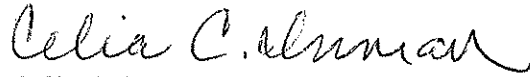
Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

An Equal Opportunity/ Affirmative Action Employer



separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,



Celia C. Inman
Project Analyst



Martha J. Frisone,
Assistant Chief, Certificate of Need

cc: Acute and Home Care Licensure and Certification Section, DHSR
Kelli Fisk, Program Assistant, Healthcare Planning

WILLIAMS MULLEN

Jheath@williamsmullen.com

Direct Dial (919) 981-4001

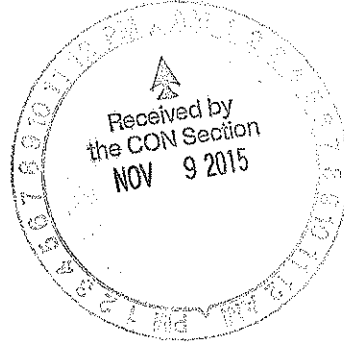
Via E-Mail

TO: Martha J. Frisone, Assistant Chief

FROM: Joy Heath

RE: Prior Written Notice

DATE: November 9, 2015



Our law firm represents Well Care Home Health, Inc. ("Well Care") and, pursuant to N.C. Gen. Stat. § 131E-184(a)(8), we write to provide prior written notice of our client's plans, as described below.

The County of Davie, a body corporate and politic authorized by the laws of North Carolina, is licensed to provide Home Care Services, including, without limitation, Medicare-certified home health services and hospice services, pursuant to License Number HC0496. A copy of the License for operation of the Davie County Agency is attached for your reference.

Well Care, either directly or through a subsidiary or newly-created entity, anticipates entering into an arrangement to acquire substantially all of the assets of the Davie County Agency. Well Care and Davie County plan to close on or before December 31, 2015.

The acquisition of "an existing health service facility, including equipment owned by the health service facility at the time of acquisition" is exempt from certificate of need review pursuant to N.C. Gen. Stat. § 131E-184(a)(8). A "health service facility" is defined by N.C. Gen. Stat. § 131E-176(9b) to include a home health agency office as well as a hospice office.

Based on the foregoing, it is our understanding that our client's plans are exempt from certificate of need review pursuant to N.C. Gen. Stat. Section 131E-184(a)(8). Accordingly, Well Care respectfully requests confirmation that, based on the CON law currently in effect, the proposal described above is not governed by, and, therefore, does not currently require a certificate of need.

Please let us know of any questions or additional information that may be required. Thank you for your attention to this request.

State of North Carolina

Department of Health and Human Services Division of Health Service Regulation

Effective January 01, 2015, this license is issued to

Davie County Health Department

*to operate an agency known as
Davie County Home Health Agency*

*located at 642 Wilkesboro Street
City of Mocksville, North Carolina.*

*This license is issued subject to the statutes of the
State of North Carolina, is not transferable and shall expire
midnight December 31, 2015.*

Facility ID: 943723

License Number: HC0496

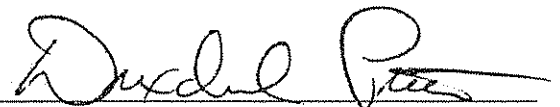
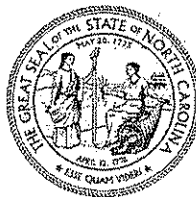
*Home Care Services: Nursing Care, Infusion Nursing, In-home Aide, Medical Social Services, Physical Therapy,
Occupational Therapy, Speech Therapy, Clinical Respiratory, Hospice Services, Companion,
Sitter, Respite*

This agency is authorized to provide Medicare-certified home health services.

Authorized by:



Secretary, N.C. Department of Health and
Human Services



Director, Division of Health Service Regulation