



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER  
GOVERNOR

MANDY COHEN, MD, MPH  
SECRETARY

MARK PAYNE  
DIRECTOR

May 31, 2017

Tracey C. Cosby  
115 Perimeter Center Place NE, Suite 600  
Atlanta, GA 30346

**No Review**

**Record #:** 2287  
**Facility Name:** Emerald Ridge Rehabilitation and Care Center  
**FID #:** 923161  
**Business Name:** Emerald Ridge HealthCare, LLC  
**Business #:** 2656  
**Project Description:** Convert semi-private nursing facility rooms into private rooms with no change in the number of licensed nursing facility beds (100)  
**County:** Buncombe

Dear Ms. Cosby:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of May 24, 2017 regarding the above referenced proposal. Based on the CON law **in effect on the date of this response to your request**, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that if the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective. Furthermore, this letter does not address whether or not the 14 adult care home beds would be available for acquisition by another entity.

However, you need to contact the Agency's Nursing Home Licensure and Certification Section to determine if they have any requirements for development of the proposed project.

It should be noted that this determination is binding only for the facts represented in your correspondence. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the

**HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION**

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TELEPHONE 919-855-3873

LOCATION: EDGERTON BUILDING • 809 RUGGLES DRIVE • RALEIGH, NC 27603

MAILING ADDRESS: 2704 MAIL SERVICE CENTER • RALEIGH, NC 27699-2704

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original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,



Julie Halatek  
Project Analyst



Martha J. Frisone  
Chief, Healthcare Planning and Certificate of Need

cc: Nursing Home Licensure and Certification Section, DHSR  
Adult Care Licensure Section, DHSR  
Paige Bennett, Assistant Chief, Healthcare Planning, DHSR



CONSULATE HEALTH CARE

*At the Heart of Caring*

May 24, 2017

**VIA FEDERAL EXPRESS**

Ms. Martha Frisone  
Assistant Section Chief  
NC Division of Health Service Regulation  
Healthcare Planning and Certificate of Need Section  
809 Ruggles Drive  
Raleigh, NC 27603



**RE: Emerald Ridge Rehabilitation and Care Center – Buncombe County  
Exemption from Review**

Dear Ms. Frisone:

I am writing on behalf of Emerald Ridge HealthCare, LLC d/b/a Emerald Ridge Rehabilitation and Care Center ("Emerald Ridge"), located at 25 Reynold Mountain Boulevard, Asheville, NC 28804-1270 which is licensed for 100 skilled nursing ("SNF") beds and 14 adult care home ("ACH") beds. Emerald Ridge plans to convert its semi-private SNF rooms to private SNF rooms (the "Conversion"). Following this conversion, Emerald Ridge will continue to have 100 licensed SNF beds. The conversion will take place upon approval from DHHSR.

In a separate transaction a third party will relocate Emerald Ridge's 14 ACH beds to a different facility in the same county, upon DHHS approval. This transfer will afford Emerald Ridge the space to convert its semi-private SNF beds to private SNF beds. While we understand that this party will need to submit a certificate of need ("CON") application for the transfer and relocation of the 14 ACH beds, we understand the Conversion itself does not require CON review. Because the conversion does not involve the development of a new institutional health service or an acquisition, and is expected to involve an expenditure of \$100,000, we understand it is not an activity requiring a CON or CON review. We also understand that the proposed Conversion described above does not require any additional filings with your office prior to these changes taking place, and that we may proceed with consummating the proposed changes upon approval from the Licensure and Certification Section.

We respectfully request a letter of exemption from North Carolina's Certificate of Need Section for the proposed change in licensed beds, detailed above.

Ms. Martha Frisone

May 24, 2017

Page 2

Thank you for your attention to this matter. If you have any questions, please do not hesitate to contact me at (770) 730-1103 or [tracey.c.cosby@consulatehc.com](mailto:tracey.c.cosby@consulatehc.com).

Sincerely,



Tracey C. Cosby

VP Regulatory Support Services

cc: Candance Fisher, NHA  
Qwonthafia C. Jones  
Beverly Speroff  
Jessica Tobin Grozine  
Grant Johnson  
Cory Bennett