



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

October 31, 2019

James C. Wrenn, Jr.
jcw@hickswrennlaw.com

Exempt from Review – Acquisition of Facility

Record #: 3095
Facility Name: Shuler Health Care/Pierce Villa
Type of Facility: ACH
FID #: 921087
Acquisition by: Star Care Network, Inc.
Business #: 3124
County: Forsyth

Dear Mr. Wrenn:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your representations, the above referenced proposal is exempt from certificate of need (CON) review in accordance with N.C. Gen. Stat. §131E-184(a)(8). Therefore, the above referenced business may proceed to acquire the health service facility identified above without first obtaining a CON. The Agency's determination is limited to the question of whether or not the above referenced business would have to obtain a CON if the current owners of the health service facility do in fact sell it to the business listed above. Note that pursuant to N.C. Gen. Stat. §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."*

In the event that the business listed above does acquire the facility, you should contact the Agency's Adult Care Licensure Section to obtain instructions for changing ownership of the existing facility.

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 separate determination regarding whether or not a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Celia C. Inman
Project Analyst

Martha J. Frisone
Chief

cc: Adult Care Licensure Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603
MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704
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LAW OFFICES OF
HICKS WRENN, PLLC

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James C. Wrenn, Jr.
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PO Box 247
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October 23, 2019

Via email and overnight delivery

Ms. Martha Frisone
Section Chief
NC Department of Health and Human Services
Division of Health Service Regulation
Healthcare Planning and Certificate of Need Section
809 Ruggles Drive
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Division of Health Service Regulation
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809 Ruggles Drive
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**Re: Shuler Health Care/Pierce Villa
Shuler Health Care, Inc.
250 Pitts St., Kernersville, NC 27284 (Forsyth County)
License Number: HAL-034-011**

Dear Ms. Frisone and Ms. Inman:

I represent Star Care Network, Inc (“SCN”). SCN proposes to acquire the real property constituting the existing health service facility licensed as an adult care home known as Shuler Health Care/Pierce Villa from GSKW Properties, LLC and the operations of the facility from Shuler Health Care, Inc. (Licensee: Shuler Health Care, Inc.; Address: 250 Pitts St., Kernersville, NC 27284 (Forsyth County); License Number: HAL-034-011; Real Property Owner: GSKW Properties, LLC). After SCN receives its license to operate the facility, the adult care home will be known as Shuler Health Care/ Pierce Villa.

Pursuant to G.S. §131D-184(a)(8), I understand that this transaction is exempt from review and, as a result, we request that you confirm that understanding by providing us with a “no review” letter.

As always, thank you for your assistance.

Sincerely,

HICKS WRENN, PLLC

A handwritten signature in blue ink, appearing to read 'J. Wrenn, Jr.', is written over the printed name 'James C. Wrenn, Jr.'.

James C. Wrenn, Jr.

JCWjr/gtk