

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

November 5, 2020

Greg Gaylis

Greg.gaylis@agg.com

No Review

Record #:3402Facility Name:RehabCareFID #:140283

Business Name: RehabCare Group East, LLC

Business #: 2779

Project Description: Change in indirect ownership interest

County: Buncombe

Dear Mr. Gaylis:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence 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 that correspondence is not governed by, and therefore, does not currently require a certificate of need. 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.

You may need to contact the Agency's Acute and Home Care Licensure and Certification Section to determine if they have any requirements for development of the proposed project.

This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office.

Please do not hesitate to contact this office if you have any questions.

Sincerely,

Ena Lightbourne Project Analyst

Martha J. Frisone

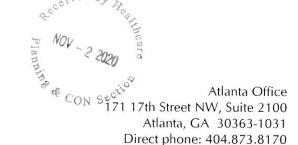
Martha J. Frisone

Chief

cc: Acute and Home Care Licensure and Certification Section, DHSR

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

Arnall Golden Gregory LLP



Direct fax: 404.873.8171 E-mail: greg.gaylis@agg.com

October 30, 2020

VIA FEDERAL EXPRESS

Ms. Martha Frisone NC Division of Health Service Regulation Certificate of Need Section 809 Ruggles Drive Raleigh, NC 27603

Re: NC Home Care Agency / Indirect Ownership Changes

RehabCare Group East, LLC d/b/a RehabCare (License # HC4674) 932 Hendersonville Road, Suite 104

Asheville, North Carolina 28803

Dear Ms. Frisone:

This letter is to inform you of a proposed change involving the above-referenced home care agency (the "Agency"), which will result in new indirect owners multiple levels above the licensed entity. In connection with the proposed change, the licensee's federal tax identification number (EIN) and national provider identifier (NPI) will not change. A "before-and-after" structure chart showing the current structure and the proposed structure is enclosed with this letter as <u>Attachment A</u> for your reference.

It is our understanding that the proposed change described above and in the enclosed structure chart does not require any additional filings and we respectfully request the issuance of an "Exemption or No Review Letter" confirming our understanding.

Thank you for your attention to this matter. If you have any questions or require any additional information, please do not hesitate to contact me.

Sincerely,

Arnall Golden Gregory LLP

[n/K

Greg Gaylis

Enclosures

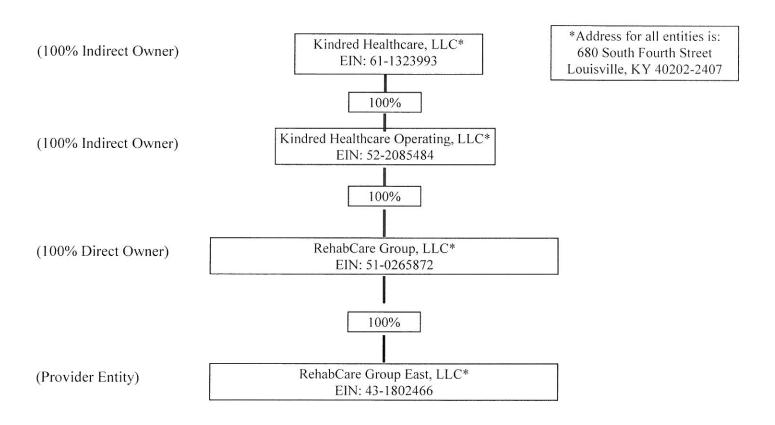
cc: Hedy S. Rubinger, Esq.

ATTACHMENT A

(See Attached)

North Carolina

CURRENT OWNERSHIP DIAGRAM



North Carolina

PROPOSED OWNERSHIP DIAGRAM

