

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

March 5, 2021

Sophia B. Pierce

Cmathews@sbpierce.org

No Review

Record #: 3497

Date of Request: February 26, 2021

Facility Name: My Place FID #: 944879

Business Name: Sophia B. Pierce & Associates, Inc.

Business #: 3345

Project Description: Change in licensee County: Cumberland

Dear Ms. Pierce:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the project described above. Based on the CON law in effect on the date of this response to your request, the project as described 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.

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.

Tanya M. Saporito
Project Analyst

Lisa Pittman

Assistant Chief, Certificate of Need

cc: Mental Health Licensure and Certification Section, DHSR

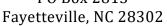
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

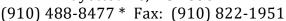
LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603

MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704

https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

Sophia B. Pierce & Associates, Inc. PO Box 2813







VIA ELECTRONIC MAIL: martha.frisone@dhhs.nc.gov

Martha Frisone, Chief HPCON NCDHSR 809 Ruggles Dr. 2704 Mail Service Center Raleigh, NC 27699-2704

Friday, February 26, 2021

Re: Request for Exemption from Review

Dear Ms. Frisone:

Please accept this letter as notification that I Sophia B. Pierce owner of Sophia B. Pierce and Associates, Inc. am requesting a letter for Exemption from Review. I am the current owner of the bricks and mortar of the two following ICF facilities that we plan to take ownership of including Licensee.

Thomas S. Decatur Home
 My Place

• MHL-026-097 MHL-026-017

• Facility ID: 922748 Facility ID: 944879

• 7559 Decator Dr. 1050 Hogan St.

Fayetteville, NC 28303-1989
 Fayetteville, NC 28311-2340

Cumberland County
 Cumberland County

• Owner of Bricks & Mortar: Sophia B. Pierce Owner of Bricks & Mortar: Sophia B. Pierce

The current owners of the licensee are Sera Gilmore and George Gilmore. Prior to submitting a Change of Ownership (CHOW) we must request this letter from you. If anything else is needed, please feel free to contact me. Sera Gilmore has already submitted the Intent to Sale.

Sincerely,

Sophia B. Pierce, President

Sophia B. Pierce

Sophia B. Pierce & Associates, Inc.

PO Box 2813 Fayetteville, NC 28301

(910) 488-8477 * Fax (910) 822-1951

Cmathews@sbpierce.org

Sophia B. Pierce & Associates, Inc. PO Box 2813 Fovetteville, NC 28202



Fayetteville, NC 28302 (910) 488-8477 * Fax: (910) 822-1951

Contact Person: Cheryl Mathews, Deputy Director