



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

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

VIA EMAIL ONLY

October 26, 2021

Esther N. Fleming  
[Esther.Fleming@davita.com](mailto:Esther.Fleming@davita.com)

**No Review**

**Record #:** 3708  
**Date of Request:** October 5, 2021  
**Facility Name:** Catawba County Dialysis  
**FID #:** 160450  
**Business Name:** DaVita, Inc.  
**Business #:** 600  
**Project Description:** Add home hemodialysis training and support services to the facility  
**County:** Catawba

Dear Ms. Fleming:

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,

Ena Lightbourne

Micheala Mitchell  
Chief

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

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

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



October 4, 2021

Ms. Ena Lightbourne, Project Analyst  
Healthcare Planning and Certificate of Need Section  
Division of Health Service Regulation  
North Carolina Department of Health and Human Services  
809 Ruggles Drive  
Raleigh, NC 27603

**No Review Request – Add HHD Modality to Existing In-Center Facility**

Facility: Catawba County Dialysis  
County: Catawba  
FID#: 160450

Dear Ms. Lightbourne:

We are requesting a No Review Determination which will allow Catawba County Dialysis to add the Home Hemodialysis (HHD) modality to the facility. Catawba County Dialysis has identified two ESRD patients who want to change from their current modality to HHD. Based on conversations with the nephrologists who admit patients to the facility, additional patients choosing HHD are anticipated.

We are not seeking to add any additional dialysis stations to the facility with this request. Catawba County Dialysis has a Registered Nurse who has been trained in the HHD modality and there is adequate space in the facility to accommodate HHD training and support services.

The facility will continue to offer in-center dialysis as well as training and support for peritoneal dialysis. This change will not adversely impact the patient population of Catawba County Dialysis.

The facility would like to be able to offer these services as soon as possible, so we appreciate your prompt review of this request. You can contact me at 704-323-8384 if you have any questions or need more information.

Sincerely,

A handwritten signature in black ink that reads "Esther N. Fleming".

Esther N. Fleming  
Director, Healthcare Planning

**From:** [Esther Fleming](#)  
**To:** [Lightbourne, Ena](#)  
**Cc:** [Waller, Martha K](#)  
**Subject:** [External] No Review Determination Requests  
**Date:** Tuesday, October 5, 2021 11:45:43 AM  
**Attachments:** [image003.png](#)  
[image004.png](#)  
[McDowell - No Review Request Add PD -2021.10.04.pdf](#)  
[Catawba County - No Review Request \(add HHD\) - 2021.10.04.pdf](#)

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Good morning,

Attached are two No Review Determination requests for in-center facilities in HSA 1 where we'd like to add home modalities:

- McDowell Dialysis, FID# 040266
- Catawba County Dialysis, FID# 160450

Please let me know if you have any problem with the files.

Best,  
Esther

*Esther N. Fleming*  
Director, Healthcare Planning  
TOPCATS & Carolina Waves Divisions

### DaVita Kidney Care

2321 W. Morehead Street | Charlotte, NC 28208  
Mobile: (704) 323-8384 | Fax: (866) 602-7580  
WebEx: <https://village.webex.com/meet/esther.fleming>



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-DaVita Inc-