

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

April 26, 2023

Angela Kelly

Licensing@msahealthcare.com

No Review

Record #: 4180

Date of Request: April 17, 2023

Facility Name: Medi Home Hospice

FID #: 041396

Business Name: MSA Home Health and Hospice of NC, Inc.

Business #: 2313

Project Description: Relocation of a home hospice agency within the same county

County: Robeson

Dear Ms. Kelly:

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

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Micheala Mitchell

Micheala Mitchell

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

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



* * * * MEDICAL SERVICES OF AMERICA, INC.

4/17/2023

NC Department of Certificate of need

RE: Request to continue service

To whom it may concern,

This is to notify you that our current Hospice location located in Lumberton NC will be relocating to a new office in Saint Paul's NC. We currently have a CON in place and there will be no changes in the counties our location will service (Robeson, Bladen, Columbus, Cumberland, Lee, Harnett, Hoke, Sampson, Scotland) and we are inquiring to see if there is anything additional needed to ensure our CON is in compliance.

Below I have listed the current address as well as the new address that will become effective April 28, 2023 our current DHHS license number is H0S2861 Facility ID #041396.

Please advise if anything additional is needed, thank you.

Old Address:	New Address:
MSA Home Health and Hospice of NC, Inc.	MSA Home Health and Hospice of NC, Inc.
D/B/A Medi Home Hospice	D/B/A Medi Home Hospice
514 Peterson Drive	564 W McLean Street Suite B
Lumberton NC 28358	Saint Pauls NC 28384
Tax ID: 474993299	Tax ID: 474993299
NPI# 1831634179	NPI# 1831634179
Location # 4035	Location # 4035

Thank you,

Angela Kelly

Managed Care Licensing & Credentialing Liaison

MSA | Corporate Headquarters

gel Kely

Medical Services of America, Inc.

PO Box 609

Attn: Licensing Dept Lexington, SC 29071

Phone: 803.957.0500 Ext 6075

Fax: 803.358.5741

Email: Licensing@msahealthcare.com

From: <u>Tanya, Saporito</u>
To: <u>Stancil, Tiffany C</u>

Subject: FW: [External] CON Move notice _ request _ 4035

Date: Tuesday, April 18, 2023 1:14:43 PM

Attachments: 4035 CON Letter.doc

Hi Tiffany,

I've already saved the letter in my S drive; will you please just log this?

Thank you SO much.

Tanya Saporito, **J.D.** *I work from home and in the office. Email is the best way to contact me.*

Project Analyst

<u>Division of Health Service Regulation</u>, Certificate of Need NC Department of Health and Human Services

Office: 919-855-3873

Tanya.saporito@dhhs.nc.gov

809 Ruggles Drive, Edgerton Building 2704 Mail Service Center Raleigh, NC 27699-2704

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From: Angela Kelly < AKelly@msahealthcare.com>

Sent: Monday, April 17, 2023 2:55 PM

To: Tanya, Saporito <tanya.saporito@dhhs.nc.gov>

Cc: licensing < licensing@msa-corp.com>

Subject: [External] CON Move notice _ request _ 4035

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Hi Tanya,

Please see attached move notice and request to continue our servicing area with our current CON.

If anything else is needed please let me know.

Thank you

Angela Kelly Contract Analyst/Team Lead MedAmerica Department



Medical Services of America, Inc. Office: 803-957-0500 ext 7915

Fax: 803.358.5741

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