



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

January 24, 2023

Ramesh Ramchandran
575 Laurel Oaks Lane
Milton, GA 30004

Exempt from Review – Acquisition of Facility

Record #: 4121
Date of Request: January 9, 2023
Facility Name: Cedar Creek Living
Type of Facility: Adult Care Home
FID #: 940543
Acquisition by: Highlands Senior Living, LLC
Business #: 3661
County: Rutherford

Dear Mr. Ramchandran:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that the project described above is exempt from certificate of need (CON) review in accordance with G.S. 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 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 G.S. 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.”

If 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 a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

[Signature of Ena Lightbourne]

Ena Lightbourne, Project Analyst

[Signature of Micheala Mitchell]

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

# State of North Carolina

Department of Health and Human Services  
Division of Health Service Regulation

*Effective January 1, 2023, this license is issued to*

***Cedar Creek Living, LLC***

*to operate an Adult Care Home known as*

***Cedar Creek Living***

*located at 2270 Oakland Road*

*Forest City, NC 28043*

*County: Rutherford*

*This license is issued subject to the statutes of the  
State of North Carolina, is not transferable and shall expire  
midnight December 31, 2023*

***Facility ID: 940543***

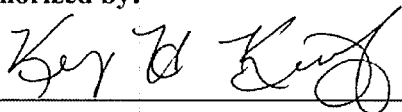
***License Number: HAL-081-052***

***Capacity:44***

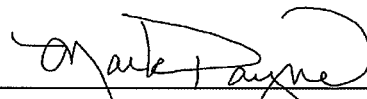
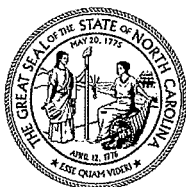
***Special Care Units:No***

***Type: Alzheimer's/Dementia: 0***

Authorized by:



Secretary, N.C. Department of Health and  
Human Services



Director, Division of Health Service Regulation

**From:** [Waller, Martha K](#)  
**To:** [Ashley DeMarco](#); [Yakaboski, Greg](#)  
**Cc:** [Lightbourne, Ena](#); [Stancil, Tiffany C](#)  
**Subject:** RE: [External] Cedar Creek CON Waiver Letter  
**Date:** Monday, January 9, 2023 12:43:20 PM

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Tiffany, new for Log...

Ms. DeMarco,

I have just returned today from 2 month absence. I have just had the chance to view your email. There is not a form we send for you to obtain a waiver. The information in your email may be the requirements needed for the County Analyst to complete your response with. However, the Analyst for the county of the facility will be Ena Lightbourne. I have included her on this email, so she is aware of the incoming request. I have also included the Admin to ensure it gets logged in for processing. Ena can confirm with you if anything else is required/needed. Sorry for the delay in a response to you, Greg may be out of office, I haven't seen everybody yet. Have a great day!

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**From:** Ashley DeMarco <ademarco@shinvestments.net>  
**Sent:** Monday, January 9, 2023 12:28 PM  
**To:** Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov>; Waller, Martha K <martha.waller@dhhs.nc.gov>  
**Subject:** [External] Cedar Creek CON Waiver Letter

**CAUTION:** External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to [Report Spam](#).

Martha,

Following up with you on the below email....

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**From:** Ashley DeMarco  
**Sent:** Thursday, January 5, 2023 11:05 PM  
**To:** [greg.yakaboski@dhhs.nc.gov](mailto:greg.yakaboski@dhhs.nc.gov); [martha.waller@dhhs.nc.gov](mailto:martha.waller@dhhs.nc.gov)  
**Subject:** Cedar Creek CON Waiver Letter

Hello Martha & Greg,

Happy New Year. Can you help me with another CON waiver letter or point me in the right direction of who I need to contact to help me? Can you please provide a CON Waiver letter for an operating assisted living facility? The purchaser is in agreement to purchase all the assets of the facility including the Real Estate, business/operations and all CON rights of:

Cedar Creek Living  
2270 Oakland Road  
Forest City, NC 28043

The purchaser contact information is as follows:

Highlands Senior Living LLC  
575 Laurel Oaks Lane  
Milton GA 30004

Name of facility After Closing will be Cedar Creek Living. If you could please make the letter to Ramesh Ramchandran.

Please let me know what else you need to provide CON Waiver Letter.

Ashley DeMarco  
President  
Seniors Housing Investments  
PO. Box 211003  
Columbus, OH 43221  
614-595-1843 Phone  
888-301-9217 Fax  
[ademarco@SHinvestments.net](mailto:ademarco@SHinvestments.net)

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