



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

JOSH STEIN • Governor

DEVDUTTA SANGVAI • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

September 12, 2025

Paula Podgurski

ppodgurski@bayada.com

No Review

Record #: 4909

Date of Request: August 12, 2025

Facility Name: BAYADA Home Health Care

FID #: 010936

Business Name: BAYADA Home Health Care, Inc.

Business #: 3980

Project Description: Provide home health care services to residents of Alleghany County

County: Catawba

Dear Ms. Podgurski:

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 representation in your request and 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. **As a reminder, it is unlawful to offer or develop a new institutional health service without first obtaining a certificate of need. The Department reserves the right to impose sanctions, including civil penalties and the revocation of a license, upon any entity that offers or develops a new institutional health service without first obtaining a certificate of need.**

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

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

Sincerely,

A handwritten signature in cursive script that reads "Gloria C. Hale".

Gloria C. Hale
Team Leader

A handwritten signature in cursive script that reads "Micheala Mitchell".

Micheala Mitchell
Chief

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



4300 Haddonfield Rd.
Pennsauken, NJ 08109

973-909-5159
973-909-5026 fax
www.bayada.com

August 12, 2025

North Carolina Department of Health and Human Services
Division of Health Service Regulation
Licensure/Certification/Acute/Home Care Section
2712 Mail Service Center
Raleigh, North Carolina 27699

RE: No review letter request for license #HC0358
FID # 953832

To Whom it May Concern:

Please accept this letter as notification that the BAYADA Home Health Care, Inc. service office located at 900 West Cooksey Drive, Suite G, Thomasville, NC 27360, is requesting a no review letter.

Our plan is to be able to provide services to residents of Moore County from the office location in Thomasville. This location provides skilled nursing services.

Please forward confirmation via email to ppodgurski@bayada.com. Should you have any questions please do not hesitate to contact me at 973-909-5159.

Sincerely,

Paula Podgurski

Paula Podgurski
Senior Associate, Licensing and Enrollment

Compassion. Excellence. Reliability.

From: [Mckillip, Mike](#)
To: [Bradford, Cynthia L](#)
Cc: [Stancil, Tiffany C](#)
Subject: FW: [External] RE: Requesting no review letter for BAYADA for Moore County
Date: Tuesday, August 12, 2025 1:14:57 PM
Attachments: [Moore County.pdf](#)
[DAV 1-1-25 to 12-31-25 \(1\).pdf](#)

Hi Cindy,

Can you please handle this no review letter request from Bayada to provide home health services to residents of Moore County from their Thomasville office?

Mike

Michael McKillip

Team Leader, Certificate of Need
Division of Health Service Regulation, Healthcare Planning and Certificate of Need
[NC Department of Health and Human Services](#)

Office: 919-855-3877 (I am in the office on Wednesday and Friday, and can best be reached by email on Monday, Tuesday and Thursday.)
mike.mckillip@dhhs.nc.gov

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

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From: Stancil, Tiffany C <Tiffany.Stancil@dhhs.nc.gov>
Sent: Tuesday, August 12, 2025 1:06 PM

To: Mckillip, Mike <mike.mckillip@dhhs.nc.gov>
Cc: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Subject: FW: [External] RE: Requesting no review letter for BAYADA for Moore County

Here is another one for Tanya

Tiffany Stancil

Administrative Specialist I

[Division of Health Service Regulation](#), Healthcare Planning and CON Section
[ncdhhs.gov/] [NC Department of Health and Human Services](#)

Help protect your family and neighbors from COVID-19.

[Know the 3 Ws. Wear. Wait. Wash.](#)

#StayStrongNC and get the latest at nc.gov/covid19.

Office: 919-855-3872

Tiffany.Stancil@dhhs.nc.gov

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

From: Podgurski, Paula <ppodgurski@bayada.com>
Sent: Tuesday, August 12, 2025 11:32 AM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Cc: Stancil, Tiffany C <Tiffany.Stancil@dhhs.nc.gov>
Subject: [External] RE: Requesting no review letter for BAYADA for Moore County

CAUTION: External email. Do not click links or open attachments unless verified. Report suspicious emails with the Report Message button located on your Outlook menu bar on the Home tab.

Hello Micheala,

Please accept the attached letter which requests permission for the BAYADA Home Health Care, Inc. office located in Davidson County to provide services in Moore County. I would like a no review letter to this effect.

I have attached the office license as well for your convenience.

After reviewing the request, should you have any questions or require any additional

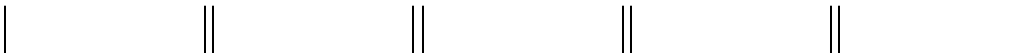
information, please do not hesitate to reach out.

Thank you,
Paula

Paula Podgurski

Senior Associate, Licensing & Enrollment (LEO) | BAYADA Home Health Care
4300 Haddonfield Road, Pennsauken, NJ 08109
O: 973-909-5159 | Cisco Ext: 0359-11 | Fax 973-909-5026 | bayada.com

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