

North Carolina Department of Health and Human Services Division of Health Service Regulation Certificate of Need Section

2704 Mail Service Center • Raleigh, North Carolina 27699-2704 http://www.ncdhhs.gov/dhsr/

Drexdal Pratt, Director

Beverly Eaves Perdue, Governor Albert A. Delia, Acting Secretary Craig R. Smith, Section Chief Phone: (919) 855-3873 Fax: (919) 733-8139

May 15, 2012

Gerald Boyle, Consultant Consultant Services 1217 Pond Street Cary, NC 27511

RE:

No Review/ Universal Health Care - Blumenthal, Inc., d/b/a Blumenthal Jewish Nursing & Rehab Center / Renovate existing Adult Care Home (ACH) space in order to have 20 nursing facility (NF) private rooms in the current and renovated space; and construct a new wing for 20 existing ACH beds / Guilford County FID # 990621

Dear Mr. Boyle:

The Certificate of Need (CON) Section received your correspondence of May 8, 2012 regarding the above referenced proposal. Based on the CON law in effect on the date of this response to your request, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that 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.

It should be noted that this determination is binding only for the facts represented by you. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by the Certificate of Need Section. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

In addition, you should contact the Construction Section to determine if they have any requirements for development of the proposed project. Please contact the CON Section if you have any questions. Also, in all future correspondence you should reference the Facility I.D.# (FID) if the facility is licensed.

Sincerely,

Lisá Pittman Team Leader Craig R. Smith, Chief Certificate of Need Section



Consultant Services

Specializing In Health Care Development & Financing 1217 Pond Street, Cary, North Carolina 27511, 919/467-4667

Gerald J. Boyle
President

May 8, 2012

Ms. Lisa Pittman Project Analyst Certificate of Need Section 2704 Mail Service Center Raleigh, N.C. 27699-2704



Dear Ms. Pittman,

Pursuant to our recent telephone conversation, please be advised that Universal Health Care/ Blumenthal, Inc. dba Blumenthal Jewish Nursing & Rehab Center located at 3724 Wireless Drive, Greensboro, NC 27455, whose Lessor is Universal Properties/ Greensboro, LLC and Leased by Universal Health Care/ Blumenthal, Inc. proposes to renovate its existing 20 licensed Home for the Aged/ Adult Care Home beds in order to have 20 private rooms for its Skilled Nursing beds that are currently located in semi-private rooms. Once the renovation is complete the 20 Home for the Aged beds will be relocated to a newly constructed 20 bed Wing of the existing facility. The cost to accomplish this project will be approximately \$1,100,000 to \$1,250,000.

Since the proposed capital expenditure is less than \$2,000,000, we believe we are exempt from Certificate of Need review.

I thank you in advance for your assistance and cooperation in this matter.

Very Truly Yours,

Gerald J. Boyle Consultant

State of Aurth Carolina Bepartment of Health and Human Services Division of Health Service Regulation

Effective January 01, 2012, this license is issued to

Universal Health Care Blumenthal Inc

to operate a nursing facility known as

Blumenthal Jewish Nursing & Rehab Center

located in Greensboro, Guilford County

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall expire midnight December 31, 2012

Fucility ID: 990621

License Number NH013

Bed Capacity

Nursing Facility Beds T3 K Adult Care Home Beds 20 1

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Authorized by:

Jani A. Camb

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



Director, Division of Health Service Regulation