



North Carolina Department of Health and Human Services  
Division of Health Service Regulation

Pat McCrory  
Governor

Aldona Z. Wos, M.D.  
Ambassador (Ret.)  
Secretary DHHS

Drexdal Pratt  
Division Director

September 24, 2013

Inez Myles  
Highland Gardens, Inc.  
P.O. Box 14548  
Raleigh, NC 27620

**No Review**

Facility or Business: Cape Fear Manor Facility  
Project Description: Highland Gardens, Inc lease of existing Cape Fear Manor Facility  
County: Bladen  
FID #: 920162

Dear Ms. Myles:

The Certificate of Need Section (CON Section) received your letter on August 13, 2013 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.

Moreover, you need to contact the Construction and Adult Care Licensure Sections of the Division of Health Service Regulation to determine if they have any requirements for development of the proposed project.

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.



**Certificate of Need Section**

[www.ncdhhs.gov](http://www.ncdhhs.gov)

Telephone: 919-855-3873 • Fax: 919-733-8139

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704


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Ms. Myles  
September 23, 2013  
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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,



Gregory E. Yakaboski, Project Analyst



Craig R. Smith, Chief  
Certificate of Need Section

cc: Medical Facilities Planning Section, DHSR  
Construction Section, DHSR (Not Hospice Home Care/ Home Health)  
Adult Care Licensure Section, DHSR

*By*

Received by  
the CON Section  
AUG 13 2013

Highland Gardens, Inc  
P.O. Box 14548  
Raleigh, NC 27620

State of North Carolina  
Department of Health and Human Services  
Adult Care  
Certificate of Need Section  
809 Ruggles Drive  
Raleigh, N.C. 27603

Attention: Gloria Hale:

Dear Ms. Hale:

Thank you for your assistance. This is an official request from Highland Gardens, Inc that we be granted "an exemption" from the "CON Review Process", relevant to the existing Cape Fear Manor Facility, in Clarkton, N.C. We will lease this facility as of September 01, 2013. Should you have any questions please contact me (919-280-7207).

Sincerely Yours,

*Inez Myles*  
Inez Myles, President