



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

Pat McCrory  
Governor

Richard O. Brajer  
Secretary DHHS

Mark Payne, Director  
Health Service Regulation

October 14, 2016

W. Stan Taylor, Vice President Corporate Planning  
WakeMed  
3000 New Bern Avenue  
Raleigh NC 27610

**No Review**

**Record #:** 2076  
**Facility Name:** WakeMed Cary Hospital  
**FID #:** 990332  
**Project Description:** Develop a vascular lab  
**County:** Wake

Dear Mr. Taylor:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of October 3, 2016 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.

However, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections 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 in your correspondence. 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 this office. 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. Please contact this office if you have any questions.

Sincerely,

Michael McKillip  
Project Analyst

Martha J. Frisone  
Assistant Chief, Certificate of Need

cc: Construction Section, DHSR  
Acute and Home Care Licensure and Certification Section, DHSR  
Paige Bennett, Assistant Chief, Healthcare Planning, DHSR



**Healthcare Planning and Certificate of Need Section**

www.ncdhhs.gov

Telephone: 919-855-3873 • Fax: 919-715-4413

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

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

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Corporate Planning  
3000 New Bern Avenue  
Raleigh, NC 27610  
(919) 350 8108  
[staylor@wakemed.org](mailto:staylor@wakemed.org)



October 3, 2016

Martha Frisone, Assistant Chief  
Certificate of Need Section  
Division of Facility Services  
2704 Mail Service Center  
Raleigh, NC 27699-2704

**Re: Request for Letter-of-No-Review for a Vascular Lab – Cary Hospital**

Dear Ms. Frisone:

WakeMed has been working with community vascular surgeons in the Cary market to better meet the needs of community residents for vascular interventions. As part of that effort the health system plans to develop a vascular lab at the Cary Hospital. Via this letter we are requesting a letter-of-no-review determination for the project.

Attached are a certified cost estimate and floorplans for the project. The cost estimate has been certified by the architect working on the project.

WakeMed believes this project should not be subject to certificate of need review, per NC GS 131E-176(14o). It is below the expenditure threshold for “major medical equipment”. We are requesting a determination from the Certificate of Need Section as to whether we may proceed with development of this project without a CON.

Thank you for your attention to this matter. If you have any questions or require additional information, please do not hesitate to contact me at (919) 350-8108.

Sincerely,

W. Stan Taylor  
Vice President Corporate Planning



Thomas G. Cavender, PE  
VP Facilities & Construction  
3000 New Bern Avenue  
Raleigh, NC 27610

September 16, 2016

Vascular Laboratory  
WakeMed Cary Hospital

RE: Cost Certification

To Whom It May Concern:

This is to certify that I have reviewed the Construction Costs for the referenced project. Based on my review and comparison of this project with similar projects, I believe the costs indicated are a reasonable estimate of the costs to be expected on a project of the scope defined. The *Anticipated Construction Cost* of \$118,559 combined with the *Associated Soft Costs* of \$599,844 creates a **TOTAL PROJECT BUDGET** for the new vascular laboratory project at Cary Hospital of \$718,403.

Sincerely,

A handwritten signature in cursive script, appearing to read "Thomas Cavender".

Thomas Cavender, PE  
Vice President, Facilities & Construction

**PROPOSED TOTAL CAPITAL COST OF PROJECT**

Project Name: Vascular Laboratory

Provider/Company: WakeMed Cary Hospital

**A. Site Costs**

(1) Full purchase price of land.....	_____	_____
Acres _____ Price per Acre _____	_____	_____
(2) Closing costs.....	_____	_____
(3) Site Inspection and Survey.....	_____	_____
(4) Legal fees and subsoil investigation	_____	_____
(5) Site Preparation Costs		
Soil Borings.....	_____	_____
Clearing-Earthwork...	_____	_____
Fine Grade For Slab...	_____	_____
Roads-Paving.....	_____	_____
Concrete Sidewalks...	_____	_____
Water and Sewer.....	_____	_____
Footing Excavation...	_____	_____
Footing Backfill.....	_____	_____
Termite Treatment...	_____	_____
Other (Specify).....	_____	_____
Sub-Total Site Preparation Costs	_____	\$0
(6) Other (Specify)	_____	_____
(7) Sub-Total Site Costs	_____	\$0

**B. Construction Contract**

(8) Cost of Materials		
General Requirements	_____	_____
Concrete/Masonry	_____	_____
Woods/Doors & Windows/Finishes	_____	_____
Thermal & Moisture Protection	_____	_____
Equipment/Specialty Items	_____	_____
Mechanical/Electrical	_____	_____
Other (Specify)	_____	_____
Sub-Total Cost of Materials.....	_____	\$46,675
(9) Cost of Labor.....	_____	\$57,048
(10) Other Contingency	_____	\$14,836
(11) Sub-Total Construction Contract	_____	\$118,559

**C. Miscellaneous Project Costs**

(12) Building Purchase.....	_____	_____
(13) Fixed Equipment Purchase/Lease	_____	\$570,903
(14) Movable Equipment Purchase/Lease	_____	_____
(15) Furniture	_____	_____
(16) Landscaping	_____	_____
(17) Consultant Fees		
Architect and Engineering Fees	\$20,330	_____
Legal Fees.....	_____	_____
Market Analysis.....	_____	_____
Other Radiation Consultants	\$4,000	_____
Other Permits, Fees, Testing	\$4,611	_____
Sub-Total Consultant Fees	_____	\$28,941
(18) Financing Costs (e.g. Bond, Loan, etc.).	_____	_____
(19) Interest During Construction.	_____	_____
(20) Other (Specify)	_____	_____
(21) Sub-Total Miscellaneous..	_____	\$599,844
(22) Total Capital Cost of Project (Sum A-C above)	_____	\$718,403

I certify that, to the best of my knowledge, the above construction related costs of the proposed project named above are complete and correct.

Cyril Wooten  
 (Signature of Licensed Architect or Engineer)

I assure that, to the best of my knowledge, the above capital costs for the proposed project are complete and correct and that it is my intent to carry out the proposed project as described.

[Signature]  
 (Title of Officer) Signature of Office Authorized to Represent Provider/Company)



WAKEMED CARY HOSPITAL  
VASCULAR LAB EQUIPMENT REPLACEMENT

CARY, NORTH CAROLINA 27518

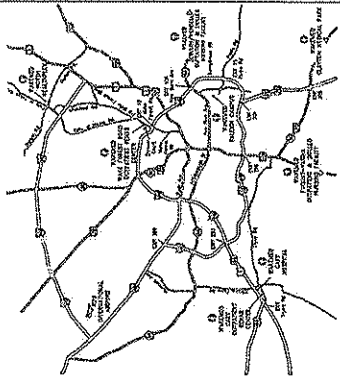
CONTACTS

**OWNER:**  
WAKEMED  
1111 NORTH SALISBURY STREET  
CARY, NC 27513  
919.467.7000

**DESIRED:**  
WAKEMED  
1111 NORTH SALISBURY STREET  
CARY, NC 27513  
919.467.7000

**ARCHITECT:**  
WAKEMED  
1111 NORTH SALISBURY STREET  
CARY, NC 27513  
919.467.7000

VICINITY MAP



PROJECT SUMMARY

The project is the replacement of the existing vascular lab equipment at the WakeMed Cary Hospital. The project is located at 1111 North Salisbury Street, Cary, NC 27513. The project is owned by WakeMed. The project is being designed by Dewberry Engineering, Inc. The project is being constructed by WakeMed. The project is being funded by WakeMed. The project is being completed in 2018.

**GENERAL:**  
REPLACE EXISTING VASCULAR LAB EQUIPMENT AT WAKEMED CARY HOSPITAL, 1111 NORTH SALISBURY STREET, CARY, NC 27513.

**ARCHITECTURAL:**  
PROVIDE ARCHITECTURAL DRAWINGS FOR THE REPLACEMENT OF THE EXISTING VASCULAR LAB EQUIPMENT AT WAKEMED CARY HOSPITAL, 1111 NORTH SALISBURY STREET, CARY, NC 27513.

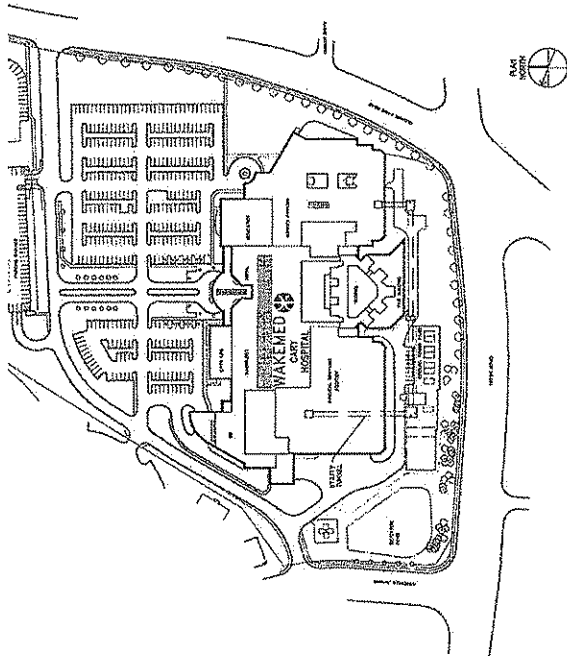
**MECHANICAL/ELECTRICAL/PLUMBING (M/E/P):**  
PROVIDE MECHANICAL/ELECTRICAL/PLUMBING DRAWINGS FOR THE REPLACEMENT OF THE EXISTING VASCULAR LAB EQUIPMENT AT WAKEMED CARY HOSPITAL, 1111 NORTH SALISBURY STREET, CARY, NC 27513.

**CONSTRUCTION:**  
PROVIDE CONSTRUCTION DRAWINGS FOR THE REPLACEMENT OF THE EXISTING VASCULAR LAB EQUIPMENT AT WAKEMED CARY HOSPITAL, 1111 NORTH SALISBURY STREET, CARY, NC 27513.

DRAWING INDEX

1.00 GENERAL NOTES  
2.00 EQUIPMENT SPECIFICATIONS  
3.00 MECHANICAL/ELECTRICAL/PLUMBING  
4.00 CONSTRUCTION

CAMPUS MAP



WAKEMED CARY HOSPITAL  
VASCULAR LAB EQUIPMENT REPLACEMENT



NO.	DATE	BY	DESCRIPTION

COVER SHEET

G-001

DATE: 08/14/18

