



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

September 2, 2016

Ruth Schwartz, Assistant VP
12900 Foster, Suite 400
Overland Park, KS 66213

No Review

Record #: 2043
Facility Name: Gentiva Health Services
FID #: 943743
Project Description: Separate one license into two separate licenses -- one for hospice services and one for all other home care services
County: Edgecombe

Dear Ms. Schwartz:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter September 1, 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.

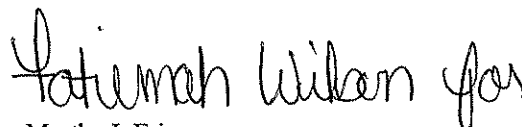
However, you need to contact the Agency's Acute and Home Care Licensure and Certification Section to determine if they have any requirements for development of the proposed project.

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. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,


Jane Rhoe-Jones
Project Analyst


Martha J. Frisone
Assistant Chief, Certificate of Need

cc: 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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VIA Overnight Mail Service and Electronic Mail Address Craig.Smith@dhhs.nc.gov

NR # 2043

September 1, 2016

Craig Smith, Chief
Jane Rhoe-Jones, Project Analyst
North Carolina Department of Health & Human Services
Healthcare Planning & Certificate of Need Section
Division of Health Services Regulation
809 Ruggles Drive, Edgerton Bldg.
Raleigh, NC 27603

FID 943743

RE: **No Review Request for Capital Care Resources, LLC, Facility ID 943743 –**
122 E. Saint James Street
Tarboro, NC 27886-5016

Dear Mr. Smith and Ms. Rhoe-Jones:

Capital Care Resources, LLC, dba ^{#336} Gentiva Health Services, ("Gentiva") has a license to provide home care services, which specifically includes nursing care, infusion nursing, in-home aide, clinical respiratory, companion/sitter/respice services, medical social services, and physical, occupational and speech therapies and hospice services. All of these services are listed on a single license – License No. HC0498.

Gentiva would like to work with the Acute and Home Care Licensure & Certification Section to have its current license (License No. HC0498) divided into two separate licenses – one for its licensed hospice services and the other for all of the remaining home care services. After the licenses are divided, Gentiva will ultimately surrender the one for its separately licensed home care services.

Because Gentiva is already licensed to provide all of the above identified services, the issuance of a separate license for its hospice business would not constitute the development of a new healthcare service requiring any certificate-of-need review.

We respectfully request that you confirm that no certificate-of-need review would be required prior to the Acute and Home Care Licensure & Certification Section issuing separate licenses for the services identified above.

If you have any questions or should you need additional information, please let me know at your earliest. If possible, I would greatly appreciate receiving your response letter either by fax at 913-814-4270 or via email at Ruth.Schwartz@Gentiva.Com. Thanking you in advance for your prompt attention to this request.

Best Regards,

Ruth Schwartz
Assistant Vice President, Licensing & Certification
913-814-2288 or 800-677-2244, extension 2288

rhoe-jones, jane e

From: Schwartz, Ruth <Ruth.Schwartz@gentiva.com>
Sent: Wednesday, August 31, 2016 5:44 PM
To: craig.smith@dhhs.nc.gov
Cc: rhoe-jones, jane e
Subject: Request for No-Review
Attachments: 2016_08_31_16_37_50.pdf

Mr. Smith and Ms. Rhoe-Homes;

Please see attached scanned copy of the original request letter that has been mailed via overnight mail service. I would greatly appreciate receiving your response letter via an email attachment to my attention at this email address, Ruth.Schwartz@Gentiva.Com.

We are hoping to accomplish the action described in the attached letter as quickly as possible within the next 30 days, pending your response.

Thank you.

Ruth

Ruth C. Schwartz

Assistant Vice President, Licensing & Certification
Kindred at Home, Formerly Gentiva Health Services
12900 Foster, Suite 400 Overland Park, KS 66213
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