



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

Roy Cooper  
Governor

Dempsey E. Benton  
Interim Secretary DHHS

Mark Payne, Director  
Health Service Regulation

January 23, 2017

Catharine W. Cumber  
3100 Tower Blvd, Suite 1300  
Durham, NC 27707

**Exempt from Review**

**Record #:** 2140  
**Facility Name:** Duke University Hospital  
**FID #:** 943138  
**Project Description:** Replace air handling units in the North bed tower  
**County:** Durham

Dear Ms. Cumber:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of January 12, 2017, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(4). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

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 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 Agency. 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.

If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Bernetta Thorne-Williams  
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](http://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

An Equal Opportunity/ Affirmative Action Employer



Record # 2140  
FID# 943038

 **Duke University Health System**

**Catharine W. Cummer**  
Regulatory Counsel, Strategic Planning



January 12, 2017

Via Electronic Mail

Martha Frisone  
Certificate of Need Section  
Division of Health Service Regulation  
2704 Mail Service Center  
Raleigh, NC 27699-2704

Re: Air handling unit replacements at Duke University Hospital

Dear Ms. Frisone:

On behalf of the Duke University Health System, I am writing to notify you of a project to be undertaken by Duke University Hospital in Durham ("DUH") and to request the Section's written confirmation that this project is exempt from certificate of need review.

DUH plans to spend more than \$2 million to replace air handling units in the Duke North bed tower, specifically units 24, 30, and 85. The current units are approximately 35 years old. Replacing the units will increase reliability, reduce energy costs by sizing the units with lower pressure drops through the filter and coil components, reduce maintenance cost with new and higher quality equipment, and control temperature more effectively to enhance patient and staff satisfaction.

It is our understanding that this project is exempt from certificate of need review pursuant to Section 131E-184(4), as it is needed "[t]o provide parking, heating or cooling systems, elevators, or other basic plant or mechanical improvements, unless these activities are integral portions of a project that involves the construction of a new health service facility or portion therefor and that is subject to certificate of need review." This project is not integral to any other construction project that would otherwise require a CON.

Martha Frisone  
January 12, 2017

We would appreciate your review of this notice and confirmation of our understanding.  
Please let me know if you have any questions or if we can provide you any further information.

Very truly yours,

A handwritten signature in cursive script that reads "Catharine W. Cummer". The signature is written in black ink and is positioned above the printed name.

Catharine W. Cummer

*Effective January 01, 2016, this license is issued to*  
***Duke University Health System, Inc.***

*to operate a hospital known as*  
***Duke University Hospital***  
*located in Durham, North Carolina, Durham County.*

*This license is issued subject to the statutes of the*  
*State of North Carolina, is not transferable and shall remain*  
*in effect until amended by the issuing agency.*

*Facility ID: 943138*

***License Number: H0015***

***Bed Capacity: 957***

*General Acute 938, Psych 19,*

**Dedicated Inpatient Surgical Operating Rooms: 6**

**Dedicated Ambulatory Surgical Operating Rooms: 9**

**Shared Surgical Operating Rooms: 50**

**Dedicated Endoscopy Rooms: 10**