



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

September 25, 2017

T. K. Majure, CEO
Our Community Hospital
PO Box 405
Scotland Neck, North Carolina 27874-0405

No Review

Record #: 2397
Facility Name: Our Community Hospital
FID #: 943386
Business Name: Our Community Hospital, Inc.
Business #: 2713
Project Description: Cease operation of 20 acute care beds and obtain stand-alone licensure for 60 long term care beds and 20 assisted living beds
County: Halifax

Dear Mr. Majure:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of September 19, 2017 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. Furthermore, this letter does not address whether or not the 20 acute care beds would be available for acquisition by another entity.

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

HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

WWW.NCDHHS.GOV

TELEPHONE 919-855-3873

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



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, Chief
Healthcare Planning and Certificate of Need Section

cc: Acute and Home Care Licensure and Certification Section, DHR
Nursing Home Licensure and Certification Section, DHR
Adult Care Licensure Section, DHR
Sharetta Blackwell, Program Assistant, Healthcare Planning, DHR

OUR COMMUNITY
HOSPITAL
&
Bryan Long Term Care Center



September 19, 2017

Martha J. Frisone, Chief
Healthcare Planning and Certificate of Need
Health Service Regulation/DHHS
809 Ruggles /drive
2704 Mail Service Center
Raleigh, NC 27699-2701

Re: FID 943386

Dear Mrs. Frisone,

Our Community Hospital is located in Scotland Neck, Halifax County, North Carolina. We presently operate a 20 bed acute care hospital, 60 bed hospital based LTC unit and 20 bed assisted living unit. All of these beds are operated under our hospital license.

Due to financial constraints, we would like to restructure our operation to operate the 60 LTC and 20 assisted living beds. There would be no associated costs with this change. We would stop operating the 20 acute beds and pursue a stand-alone license for the 60 LTC and 20 assisted living beds.

We would like to respectfully request a "Letter of No Review".

Sincerely,

A handwritten signature in black ink, appearing to read "T. K. Majure".

T. K. Majure

CEO

State of North Carolina

Department of Health and Human Services Division of Health Service Regulation

Effective January 01, 2017, this license is issued to

Our Community Hospital, Inc.

to operate a hospital known as

Our Community Hospital, Inc.

located in Scotland Neck, North Carolina, Halifax 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: 943386

License Number: H0004

Bed Capacity: 100

General Acute 20,

Nursing: 60

Adult Care: 20

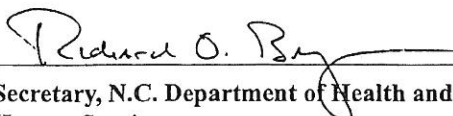
Dedicated Inpatient Surgical Operating Rooms: 0

Dedicated Ambulatory Surgical Operating Rooms: 0

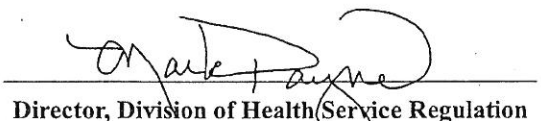
Shared Surgical Operating Rooms: 0

Dedicated Endoscopy Rooms: 0

Authorized by:


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




Director, Division of Health Service Regulation