



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

December 4, 2018

Jessica Fitch
Email: fitchjessica@ymail.com

Exempt from Review – Acquisition of Facility

Record #: 2807
Facility Name: Ridge Rest Assisted Living
Type of Facility: Adult Care Home
FID #: 941011
Acquisition by: Jessica Fitch
Business #: 2971
County: Polk

Dear Ms. Fitch:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your representations, the above referenced proposal is exempt from certificate of need (CON) review in accordance with N.C. Gen. Stat. §131E-184(a)(8). Therefore, the above referenced business may proceed to acquire the health service facility identified above without first obtaining a CON. The Agency’s determination is limited to the question of whether or not the above referenced business would have to obtain a CON if the current owners of the health service facility do in fact sell it to the business listed above. Note that pursuant to N.C. Gen. Stat. §131E-181(b): “A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.”

In the event that the business listed above does acquire the facility, you should contact the Adult Care Licensure Section, DHSR Section to obtain instructions for changing ownership of the existing facility.

It should be noted that this Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this Agency and a separate determination regarding whether or not a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Fatimah Wilson
Fatimah Wilson
Team Leader

Martha J. Frisone
Martha J. Frisone
Chief, Healthcare Planning and
Certificate of Need Section

cc: Adult Care Licensure Section, DHSR
Melinda Boyette, Administrative Assistant, Healthcare Planning, DHSR

FID# 9411011  
POC# 1404  
Bus# 2971  
Record # 2807

**Waller, Martha K**

**From:** Frisone, Martha  
**Sent:** Friday, November 30, 2018 12:03 PM  
**To:** Waller, Martha K  
**Cc:** Rupp, Tanya  
**Subject:** FW: [External] Certificate of need



FYI

**Martha J. Frisone**  
Chief

Division of Health Service Regulation, Healthcare Planning and Certificate of Need  
NC Department of Health and Human Services

Office: 919-855-3879  
[martha.frisone@dhhs.nc.gov](mailto:martha.frisone@dhhs.nc.gov)

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**From:** Jessica Fitch [mailto:[fitchjessica@ymail.com](mailto:fitchjessica@ymail.com)]  
**Sent:** Friday, November 30, 2018 12:01 PM  
**To:** Frisone, Martha <[martha.frisone@dhhs.nc.gov](mailto:martha.frisone@dhhs.nc.gov)>  
**Subject:** [External] Certificate of need

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Good morning,

My name is Jessica Fitch I am currently an administrator for Ridge Rest Assisted Living in Columbus, NC. Ridge Rest is currently owned and operated by Ron and Linda Herman. I am notifying this office of my intent to purchase the building and the business. Ridge Rest is a Adult Care Home with a 12 bed capacity that has been in operation by the current owners since August of 1979. There is no special care unit and the current license is HAL-075-001. I am asking your office for a letter of exemption from review as I am not changing or adding to the current building or business. I believe I am correct that this is the first step to changing of ownership for an Adult Care Home with 7 or more beds. Please advise me on the steps I need to complete to proceed with this Certificate of Need.

Thank you,  
Jessica Fitch

# State of North Carolina

Department of Health and Human Services  
Division of Health Service Regulation

*Effective January 1, 2018, this license is issued to*

*Ronald W. Herman & Linda S. Herman*

*to operate an Adult Care Home known as*

*Ridge Rest*

*located at 354 Woodland Drive*

*Columbus, NC, Polk County.*

*This license is issued subject to the statutes of the State of North  
Carolina, is not transferable and shall expire*

*December 31, 2018.*

*License Number: HAL-075-001*

*\*\*\* This home serves only elderly persons. \*\*\**

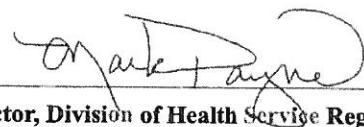
*Capacity: 12*

*Special Care Units:  Yes  No*

Authorized by:



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



Director, Division of Health Service Regulation