

**Certificate of Need
Certificates
September 2016**

County	Project ID	Facility	FID	Facility Type	Project Description	Decision Date	Certificate Issue Date	Approved Capital Expenditure
Cumberland	M-011169-16	Crossings at Fayetteville	160155	ACH	Relocate 100 adult care home beds from Countryside Villa (80) and Hope Rest Home (20) to a new location in Cumberland County and change the name to Crossings at Fayetteville	8/11/2016	9/13/2016	\$11,072,690
Rowan	F-011177-16	Lutheran Retirement Center - Salisbury, Inc.	931257	ACH	Relocate 13 adult care home beds from Lutheran Home at Trinity Oaks, Inc. and develop five adult care home beds pursuant to Policy LTC-1 for a total of 38 adult care home beds upon project completion	8/2/2016	9/2/2016	\$2,691,280
Total	2							

STATE OF NORTH CAROLINA

Department of Health and Human Services

Division of Health Service Regulation

CERTIFICATE OF NEED

for

Project ID #: M-11169-16

FID #: 160155

**ISSUED TO: Cumberland AL Investors, LLC
Cumberland Operations, LLC
533 Meadowmont Village Circle
Chapel Hill, NC 27517**

Pursuant to G.S. 131E-175, the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein, as documented by the periodic progress reports required by 10A NCAC 14C .0209. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by G.S. 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in G.S. 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to G.S. 131E-189 for any of the reasons provided in that law.

SCOPE: Relocate 100 adult care home beds from Countryside Villa (80) and Hope Rest Home (20) to a new location in Cumberland County and change the name to Crossings at Fayetteville/ Cumberland County

CONDITIONS: See Reverse Side

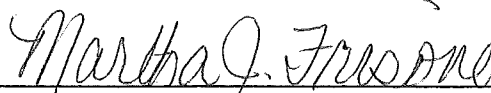
**PHYSICAL LOCATION: Crossings at Fayetteville
3976 Sycamore Diary Road
Fayetteville, NC 28303**

MAXIMUM CAPITAL EXPENDITURE: \$11,072,690

TIMETABLE: See Reverse Side

FIRST PROGRESS REPORT DUE: April 15, 2017

This certificate is effective as of the 13th day of September, 2016



Martha J. Frisone, Assistant Chief

CONDITIONS:

1. Cumberland AL Investors, LLC and Cumberland Operations, LLC shall materially comply with all representations made in the certificate of need application.
2. Upon completion of this project Crossings at Fayetteville shall be licensed for no more than 100 ACH beds.
3. For the first two years of operation following completion of the project, Crossings at Fayetteville shall not increase actual private pay charges more than 5% of the projected private pay charges provided in Section X of the application, without first obtaining a determination from the Healthcare Planning and Certificate of Need Section that the proposed increase is in material compliance with the representations in the certificate of need application.
4. Crossings at Fayetteville shall provide care to recipients of State/County Special Assistance with Medicaid for the facility, commensurate with representations made in Section VI. 2.
5. Cumberland AL Investors, LLC and Cumberland Operations, LLC shall develop and implement an Energy Efficiency and Sustainability Plan for the project that conforms to or exceeds energy efficiency and water conservation standards incorporated in the latest editions of the North Carolina State Building Codes. The plan must be consistent with the applicants' representations in the written statement as described in paragraph one of Policy GEN-4.
6. Upon approval of this project, Countryside Villa and Hope Rest Home shall take the necessary steps to de-license their existing ACH beds.
7. Cumberland AL Investors, LLC and Cumberland Operations, LLC shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Certificate of Need Section in writing prior to issuance of the certificate of need.

A letter acknowledging acceptance of and agreeing to comply with all conditions stated in the conditional approval letter was received by the Agency on September 9, 2016.

TIMETABLE:

Construction Contract Award _____	January 14, 2017
Final Drawings approved by the Construction Section, DHSR _____	March 15, 2017
25% Completion of Construction _____	June 2, 2017
50% Completion of Construction _____	August 4, 2017
75% Completion of Construction _____	October 6, 2017
Completion of Construction _____	December 15, 2017
Licensure of Facility _____	January 1, 2018

STATE OF NORTH CAROLINA

*Department of Health and Human Services
Division of Health Service Regulation*

CERTIFICATE OF NEED

for

Project ID #: J-11177-16

FID #: 931257

**ISSUED TO: Lutheran Retirement Center-Salisbury, Inc.
PO Box 947
Salisbury, NC 28145**

Pursuant to G.S. 131E-175, the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein, as documented by the periodic progress reports required by 10A NCAC 14C .0209. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by G.S. 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in G.S. 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to G.S. 131E-189 for any of the reasons provided in that law.

SCOPE: Relocate 13 adult care home beds from Lutheran Home at Trinity Oaks, Inc. and develop five adult care home beds pursuant to Policy LTC-1 for a total of 38 adult care home beds upon project completion/ Rowan County

CONDITIONS: See Reverse Side

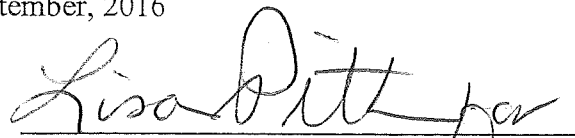
**PHYSICAL LOCATION: Lutheran Retirement Center-Salisbury
728 Klumac Road
Salisbury, NC 28144**

MAXIMUM CAPITAL EXPENDITURE: \$2,691,280

TIMETABLE: See Reverse Side

FIRST PROGRESS REPORT DUE: January 1, 2017

This certificate is effective as of the 2nd day of September, 2016


Martha J. Frisone, Assistant Chief

CONDITIONS:

1. Lutheran Retirement Center-Salisbury, Inc. shall materially comply with all representations made in the certificate of need application.
2. Lutheran Retirement Center-Salisbury, Inc. shall relocate 13 adult care home beds from Lutheran Home at Trinity Oaks, Inc. to Lutheran Retirement Center-Salisbury, Inc. and add five adult care home beds, pursuant to Policy LTC-1, for a total of 38 adult care home beds at Lutheran Retirement Center-Salisbury upon project completion.
3. Lutheran Home at Trinity Oaks, Inc. shall take steps to delicense 13 adult care home beds for a total of 12 licensed ACH beds at Lutheran Home at Trinity Oaks upon project completion.
4. The five new ACH beds shall not be certified for participation in the Medicaid program or participate in the state or county special assistance programs.
5. The five new ACH beds shall be used exclusively to meet the needs of persons with whom the facility has continuing care contracts (in compliance with the Department of Insurance statutes and regulations) who have lived in a non-nursing unit of the continuing care facility for a period of at least 30 days. Exceptions shall be allowed when one spouse or sibling is admitted to the nursing unit at the time the other spouse or sibling moves into a non-nursing unit, or when the medical condition requiring nursing care was not known to exist or be imminent when the individual became a party to the continuing care contract.
6. The five new ACH beds shall be developed on the same site with the independent living units.
7. For the first two years of operation following completion of the project, Lutheran Retirement Center-Salisbury, Inc. shall not increase actual private pay charges more than 5% of the projected private pay charges provided in Section IX of the application without first obtaining a determination from the Healthcare Planning and Certificate of Need Section that the proposed increase is in material compliance with the representations made in the certificate of need application.
8. Lutheran Retirement Center-Salisbury, Inc. shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Healthcare Planning and Certificate of Need Section in writing prior to issuance of the certificate of need.

A letter acknowledging acceptance of and agreeing to comply with all conditions stated in the conditional approval letter was received by the Agency on August 24, 2016.

TIMETABLE:

Approval of Final Drawings by the Construction Section, DHSR _____	September 15, 2016
25% Completion of Construction _____	March 1, 2017
50% Completion of Construction _____	May 1, 2017
75% Completion of Construction _____	July 1, 2017
Completion of Construction _____	September 1, 2017
Licensure of Facility _____	October 1, 2017