



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

Pat McCrory  
Governor

Richard O. Brajer  
Secretary DHHS

Drexdal Pratt  
Division Director

October 7, 2015

William McDonald  
Health Systems Management, Inc.  
P.O. Box 7710  
Tifton, GA 31793

**No Review**

**Record #:** 1758  
**Facility Name:** Northside Dialysis Center  
**FID #:** 000193  
**Business Name:** Northside Dialysis Center of Wake Forest University  
**Business #:** 1337  
**Project Description:** Add home PD training and support services  
**County:** Forsyth

Dear Mr. McDonald:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of October 5, 2015 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.

**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

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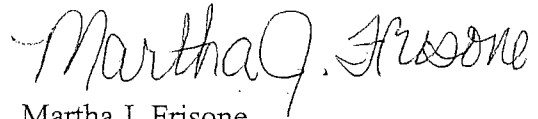
Mr. McDonald  
October 7, 2015  
Page 2

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,



Celia C. Inman  
Project Analyst



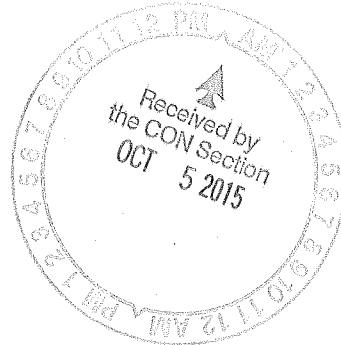
Martha J. Frisone  
Assistant Chief, Certificate of Need

cc: Acute and Home Care Licensure and Certification Section, DHSR  
Kelli Fisk, Program Assistant, Healthcare Planning

**Health Systems Management, Inc.**  
**PO Box 7710**  
**Tifton, GA 31793**

October 1, 2015

NC Division of Health Service Regulation  
Healthcare Planning and Certificate of Need Section  
Certificate of Need  
809 Ruggles Drive  
Raleigh, NC 27603



RE: Northside Dialysis Center of Wake Forest University  
500 W. Hanes Mill Rd.  
Winston-Salem, NC  
27105

Ms. Celia Inman

Northside Dialysis Center of Wake Forest University (NDC) is a 45 station ICH facility in Winston Salem, Forsyth County, NC. (CMS Letter Attached)

**NDC is asking for a letter of no review for the following request.**

Northside Dialysis Center would like to add to its current In-Center Hemodialysis services the following:

**1. Add – Home PD Training and Support Services**

Piedmont Dialysis Center of Wake Forest University is serving 119 Home Dialysis patients as of the end of August 2015. The Wake Forest Dialysis Centers have been making a very intentional effort to diversify the locations for Dialysis Home Training and Support Services. By adding Home Dialysis to the northern most facility within Forsyth County (NDC), the dialysis centers will be able to keep the patients closer to their homes for services needed.

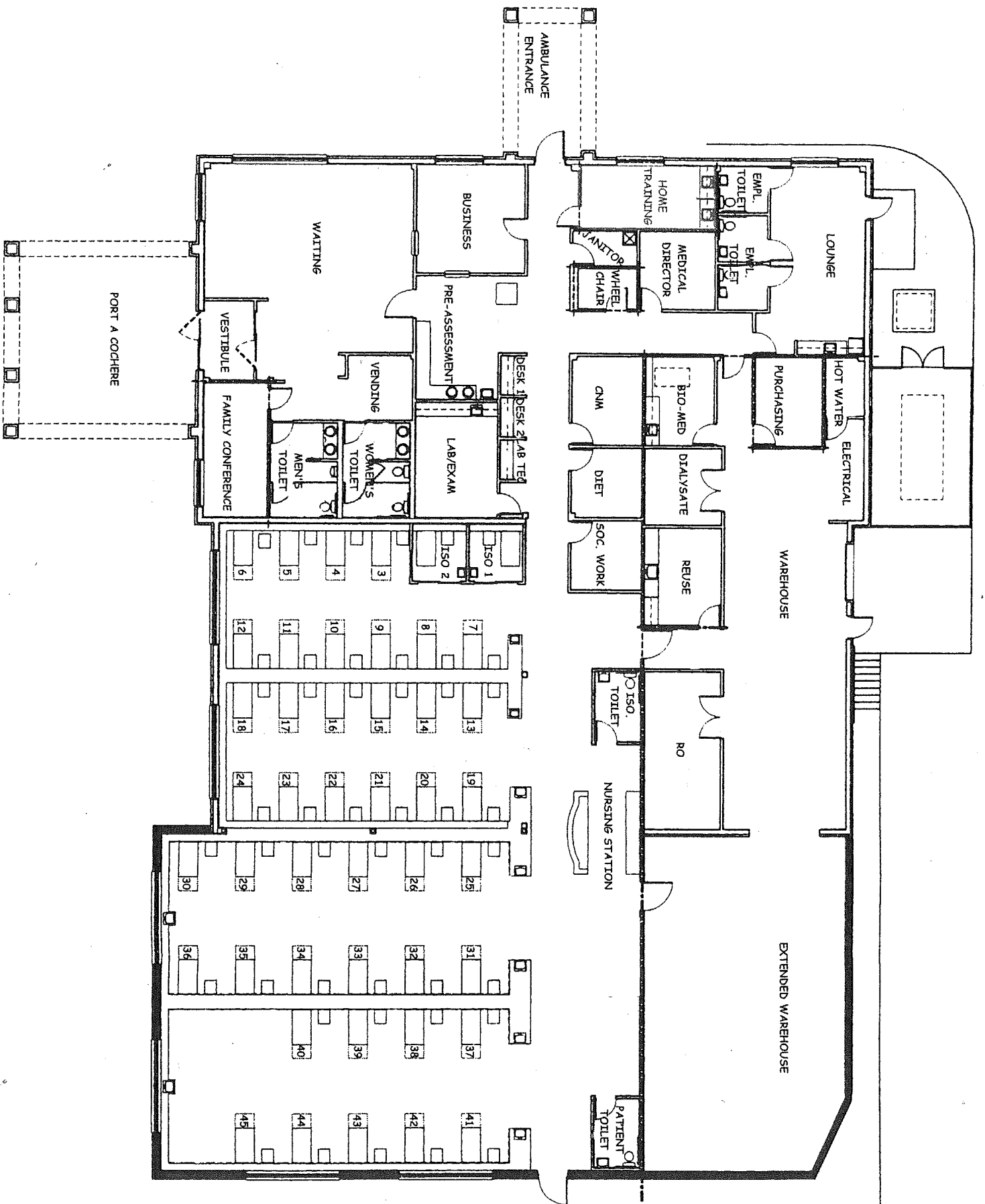
I have also attached a layout of the existing facility so that you could see that NDC is allocating space for Home Training.

Please give this request for the additional services at Northside Dialysis Center your most favorable consideration.

A handwritten signature in black ink that reads "William F. McDonald".

William F. McDonald

Director of Development  
Health Systems Management, Inc.  
Agent for the Wake Forest University Health Sciences Dialysis Facilities





**North Carolina Department of Health and Human Services**  
**Division of Health Service Regulation**  
**Acute and Home Care Licensure and Certification Section**  
2712 Mail Service Center ■ Raleigh, North Carolina 27699-2712

Beverly Eaves Perdue, Governor  
Lanier M. Cansler, Secretary  
Jeff Horton, Acting Division Director

<http://www.ncdhhs.gov/dhsr>

Azzie Y. Conley, Chief  
Phone: 919-855-4620  
Fax: 919-715-8476

May 26, 2010

Ms. Kimberly J. Clark  
Health Systems Management, Inc.  
1804 King Road  
Post Office Box 7710  
Tifton, GA 31793

Re: Northside Dialysis Center of Wake Forest University/Change in Stations  
CON Project I.D. # G-8410-09  
ESRD CMS Certification Number (CCN): 34-2612

Dear Ms. Clark:

The North Carolina State Agency has received your request to increase the certified number of dialysis stations at the above center from **39** to **45** stations pursuant to CON Project # G-8410-09. The effective date for the certification of 45 stations is May 25, 2010.

We are notifying the Dallas Regional Office ("DRO") of the Centers for Medicare and Medicaid Services of the change in stations.

Should you have questions or if I can be of further assistance please do not hesitate to call me at (919) 855-4620.

Sincerely yours,

*Azzie Y. Conley,*

Azzie Y. Conley, RN  
Licensure and Certification Section

Cc: Rachel McCarty, DRO  
Victoria McClanahan, DHSR, Medical Facilities Planning (via email)  
Craig Smith, DHSR, CON (via email)  
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