



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER  
GOVERNOR

MANDY COHEN, MD, MPH  
SECRETARY

MARK PAYNE  
DIRECTOR

May 22, 2017

Susan W. Simms, BSN, MSN  
2920 Williams Road  
Greenville, NC 27834

**No Review**

**Record #:** 2269  
**Facility Name:** River Oak Assisted Living (formerly Dixon House)  
**FID #:** 920475  
**Business Name:** Simms Assisted Living, LLC  
**Business #:** 2649  
**Project Description:** Change in Management  
**County:** Pitt

Dear Ms. Simms:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of May 12, 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.

However, you need to contact the Agency's Adult Care Licensure 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.

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

Assistant Chief, Certificate of Need

cc: Adult Care Licensure Section, DHR  
Paige Bennett, Assistant Chief, Healthcare Planning, DHR

**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



RED OAK ASSISTED LIVING  
2920 WILLIAMS ROAD  
GREENVILLE, NC 27834

June 12, 2017



Jane Rhoe-Jones  
North Carolina CON Section  
2704 Mail Service Center  
Raleigh, NC 27699-2704

Dear Ms. Rhoe-Jones,

I am writing this to request a letter of exemption for a facility which I am taking over the management of June 1. I apologize that this letter is time sensitive, however I did not know that I was in need of it until yesterday when the licensure section notified me. I am taking over the facility currently known as Dixon House (FID 920475) on June 1, 2017. It is currently managed by Robert Dixon, and will be taken over by Simms Assisted Living, LLC dba River Oak Assisted Living. The change of ownership application is at the licensure section and is complete with this one exception.

I appreciate in advance your willingness to expedite this request. I was advised to contact you in this manner by your colleague, Bernetta, who gave me your email address.

Sincerely,

Susan W. Simms, BSN, MSN

**rhoe-jones, jane e**

---

**From:** susan S <swsimms@gmail.com>  
**Sent:** Friday, May 19, 2017 10:19 AM  
**To:** rhoe-jones, jane e  
**Subject:** RE: Exemption Letter

Just management

On May 19, 2017 9:10 AM, "rhoe-jones, jane e" <[jane.rhoe-jones@dhhs.nc.gov](mailto:jane.rhoe-jones@dhhs.nc.gov)> wrote:

Good morning Susan,

Are you acquiring the bricks and mortar of the ACH or merely taking over the management?

Thanks,

Jane

**From:** susan S [<mailto:swsimms@gmail.com>]  
**Sent:** Wednesday, May 17, 2017 12:02 PM  
**To:** rhoe-jones, jane e  
**Subject:** RE: Exemption Letter

Dixon House will be Simms Assisted Living LLC dba River Oak Assisted Living. 716 Wall Street Grifton NC 28530. [252 524-4028](tel:2525244028)  
My number is [252 560-5595](tel:2525605595).

Thanks,  
Susan

---

Email correspondence to and from this address is subject to the North Carolina Public Records Law and may be disclosed to third parties by an authorized State official. Unauthorized disclosure of juvenile, health, legally privileged, or otherwise confidential information, including confidential information relating to an ongoing State procurement effort, is prohibited by law. If you have received this email in error, please notify the sender immediately and delete all records of this email.