



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER  
GOVERNOR

MANDY COHEN, MD, MPH  
SECRETARY

MARK PAYNE  
DIRECTOR

November 16, 2017

Catharine W. Cumber  
3100 Tower Blvd, Suite 1300  
Durham, NC 27707

**Exempt from Review**

**Record #:** 2437  
**Facility Name:** Duke Regional Hospital  
**FID#:** 923142  
**Business Name:** Duke University Health System  
**Business #:** 640  
**Project Description:** Replace flooring and hand rail system  
**County:** Durham

Dear Ms. Cumber:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of November 9, 2017, the above referenced proposal is exempt from certificate of need review in accordance with Gen. Stat. §131E-184(a)(4). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

However, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections 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 by you. 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 the Agency. 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.

If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Bernetta Thorne-Williams  
Project Analyst

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

cc: Construction Section, DHSR  
Acute and Home Care Licensure and Certification Section, DHSR  
Sharetta Blackwell, Program Assistant Healthcare Planning, DHSR

**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





**Catharine W. Cummer**  
Regulatory Counsel, Strategic Planning

November 9, 2017

Via Electronic Mail

Ms. Martha Frisone  
Chief  
Healthcare Planning and Certificate of Need Section  
Division of Health Service Regulation  
2704 Mail Service Center  
Raleigh, NC 27699-2704

Re: Flooring replacement at Duke Regional Hospital

Dear Ms. Frisone:

On behalf of the Duke University Health System, I am writing to notify you of a project proposed by Duke Regional Hospital in Durham ("DRH") and to request the Section's written confirmation that this project is exempt from certificate of need review. Specifically, DRH proposes to spend more than \$2 million to replace the flooring and hand rail system in the hallways on the fourth and fifth floor and to replace the flooring in the 97 patient rooms and bathrooms on three patient units in the hospital building.

It is our understanding that this project is exempt from certificate of need review pursuant to Section 131E-184(a)(4), as it is needed "[t]o provide parking, heating or cooling systems, elevators, or other basic plant or mechanical improvements, unless these activities are integral portions of a project that involves the construction of a new health service facility or portion therefor and that is subject to certificate of need review." Alternatively, it could be considered exempt pursuant to Section 131E-184(g) as a renovation of an existing health service facility that is located on the main campus. This project is not integral to any other construction project that would otherwise require a CON, and will not change bed capacity or add any other regulated assets.

Ms. Martha Frisone  
November 9, 2017

We would appreciate your review of this notice and confirmation that this project is exempt from further review. Please let me know if you have any questions or if we can provide you any further information.

Very truly yours,

A handwritten signature in cursive script that reads "Catharine W. Cummer". The signature is written in black ink and is positioned above the printed name.

Catharine W. Cummer

*Effective January 01, 2017, this license is issued to*

***Duke University Health System, Inc.***

*to operate a hospital known as*

***Duke Regional Hospital***

*located in Durham, North Carolina, Durham 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: 923142*

***License Number: H0233***

***Bed Capacity: 369***

*General Acute 316, Rehabilitation 30 , Psych 23,*

**Dedicated Inpatient Surgical Operating Rooms: 2**

**Dedicated Ambulatory Surgical Operating Rooms: 0**

**Shared Surgical Operating Rooms: 13**

**Dedicated Endoscopy Rooms: 4**