



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

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

VIA EMAIL ONLY

December 9, 2020

Sandy T. Godwin
stgodwin@capefearvalley.com

Exempt from Review

Record #: 3449
Date of Request: December 4, 2020
Facility Name: Cape Fear Valley Medical Center
FID #: 943057
Business Name: Cumberland County Hospital System, Inc.
Business #: 578
Project Description: Construct 117,278 square feet of new space to expand hospital-based ancillary and support services on the main hospital campus
County: Cumberland

Dear Ms. Godwin:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced proposal is exempt from certificate of need review in accordance with G.S. 131E-184(g). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

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,

Tanya M. Saporito
Project Analyst

for

Lisa Pittman
Assistant Chief, Certificate of Need

cc: Construction Section, DHSR
Acute and Home Care Licensure and Certification Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603
MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704
<https://info.ncdhhs.gov/dhsr/> • TEL: 919-855-3873

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



BEHAVIORAL HEALTH CARE

BLADEN COUNTY HOSPITAL

CAPE FEAR VALLEY
MEDICAL CENTER

CAPE FEAR VALLEY
REHABILITATION CENTER

HEALTH PAVILION NORTH

HIGHSMITH-RAINEY
SPECIALTY HOSPITAL

HOKE HOSPITAL

December 3, 2020

Ms. Martha Frisone
Chief, Healthcare Planning & Certificate of Need Section 117,278
Division of Health Service Regulation
N.C. Department of Health and Human Services
809 Ruggles Drive
Raleigh, NC 27626-0530

BLOOD DONOR CENTER

BREAST CARE CENTER

CANCER CENTER

CAPE FEAR VALLEY
MEDICAL GROUP

CARELINK

CAPE FEAR VALLEY
HOMECARE & HOSPICE, LLC

CUMBERLAND COUNTY EMS

FAMILY BIRTH CENTER

HEART & VASCULAR CENTER

HEALTHPLEX

LIFELINK
CRITICAL CARE TRANSPORT

SLEEP CENTER

RE: Request for Exemption from Review to construct and expand ancillary and support space of Cape Fear Valley Medical Center Pursuant to N.C. Gen. Stat. § 131E-184(g)
Facility Name: Cape Fear Valley Medical Center
Facility ID: 943057
License Number: H0213
County: Cumberland

Dear Ms. Frisone:

Please accept this letter as notification of Cumberland County Hospital System, Inc. doing business as Cape Fear Valley Medical Center's (CFVMC) intent to construct and expand hospital ancillary and support space on CFVMC's main campus pursuant to N.C. Gen. Stat. § 131E-184(g). CFVHS intends to construct approximately 117,278 square feet of space to house the following hospital-based ancillary and support spaces:

- Auditorium and meeting spaces,
- Dietary services,
- Replacement space for CFVMC's hospital-based Neurosciences outpatient clinic,
- Residency didactic space, and
- Administrative offices

The project will allow CFVMC to expand and modernize the identified spaces which are needed to better accommodate the needs of its patients, visitors, and residents. The total capital cost of the project is estimated to exceed \$2,000,000.

Under N.C. Gen. Stat. § 131 E-184(g), the Certificate of Need law provides that an applicant's proposal to replace or expand the entirety or a portion of an existing health service facility on the same main campus site that exceeds the \$2,000,000 threshold set forth in N.C. Gen. Stat. § 131E-176(16b) is nonetheless exempt from review if all of the following conditions are met:



- BEHAVIORAL HEALTH CARE
- BLADEN COUNTY HOSPITAL
- CAPE FEAR VALLEY MEDICAL CENTER
- CAPE FEAR VALLEY REHABILITATION CENTER
- HEALTH PAVILION NORTH
- HIGHSMITH-RAINEY SPECIALTY HOSPITAL
- HOKE HOSPITAL

- BLOOD DONOR CENTER
- BREAST CARE CENTER
- CANCER CENTER
- CAPE FEAR VALLEY MEDICAL GROUP
- CARELINK
- CAPE FEAR VALLEY HOMECARE & HOSPICE, LLC
- CUMBERLAND COUNTY EMS
- FAMILY BIRTH CENTER
- HEART & VASCULAR CENTER
- HEALTHPLEX
- LIFELINK CRITICAL CARE TRANSPORT
- SLEEP CENTER

- (1) the sole purpose of the capital expenditure is to renovate, replace on the same site, or expand the entirety or a portion of an existing health service facility that is located on the main campus;
- (2) the capital expenditure does not result in (i) a change in bed capacity as defined in N.C. Gen. Stat. § 131E-176(5) or (ii) the addition of a health service facility or any other new institutional health service other than that allowed in N.C. Gen. Stat. § 131E-176(16)b; and
- (3) the licensed health service facility proposing to incur the capital expenditure provides prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of N.C. Gen. Stat. § 131 E-184(g).

Further, pursuant to N.C. Gen. Stat. § 131E-176(14n), “main campus” as referenced in N.C. Gen. Stat. § 131E-184(g), means the following:

- a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
- b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building.

The CFVMC project meets each of the applicable conditions set forth above.

- The estimated capital cost of the project exceeds \$2,000,000.
- The sole purpose of the capital expenditure is to expand the existing health service facility on the main campus located at 1638 Owen Drive, North Carolina 28302. Please see Exhibit 1 for a site plan. The proposed expansion will be located on the main campus, which is the site from which CFVMC provides clinical patient services and exercises financial and administrative control over the entire facility (Hospital License # H0213, FID # 943057, please see Exhibit 2 for the hospital license). CFVMC’s Facility Executive’s office is located in the main hospital building.
- The proposed project will not result in a change in bed capacity (increase or decrease) as defined in N.C. Gen. Stat. § 131E-176(5) or the addition of a health service facility or a new institutional health service other than that allowed in N.C. Gen. Stat. § 131E-176(16b). The project will not increase the number of operating rooms or gastrointestinal rooms. The project will not result in the acquisition of major medical equipment or the offering of health services not currently provided.
- This letter constitutes the required prior written notice under N.C. Gen. Stat. § 131 E-184(g)(3).



CAPE FEAR VALLEY HEALTH

BEHAVIORAL HEALTH CARE

BLADEN COUNTY HOSPITAL

CAPE FEAR VALLEY
MEDICAL CENTER

CAPE FEAR VALLEY
REHABILITATION CENTER

HEALTH PAVILION NORTH

HIGHSMITH-RAINEY
SPECIALTY HOSPITAL

HOKE HOSPITAL

Based on the above facts, the project is exempt from Certificate of Need review. We are requesting that you confirm in writing that CFVMC's previously described project is exempt from Certificate of Need review and that CFVMC may proceed as planned with this project.

Please contact me at 910.615.6852 or stgodwin@capefearvalley.com regarding any questions concerning this request.

Sincerely,

Sandy T. Godwin
Corporate Director
Financial, Strategic Planning & Analytics
Cape Fear Valley Health System

BLOOD DONOR CENTER

BREAST CARE CENTER

CANCER CENTER

CAPE FEAR VALLEY
MEDICAL GROUP

CARELINK

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HOMECARE & HOSPICE, LLC

CUMBERLAND COUNTY EMS

FAMILY BIRTH CENTER

HEART & VASCULAR CENTER

HEALTHPLEX

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SLEEP CENTER

Exhibits

Exhibit 1
Site Plan &
Construction Rendering



New Construction for CFVMC Ancillary & Support Space

CAPE FEAR VALLEY MAIN HOSPITAL

CANCER CENTER

MELROSE ROAD

OWEN DRIVE

HELICOPTER PAD



BUS SERVICE BENCH
SIGNAGE

PAVER SIDEWALK

CITY SCAPE WITH TREES,
COLORS & IRRIGATION
ALONG RETAINING WALL

LENGTHENED
COMMUNITY
SIDEWALK

CONTROL
GATE

EXIT ONLY

TERRACE WITH
GREENSCREEN

ENGRAVED PAVERS
FOR PAVED SEATING
& WALK

GRANITE FINES
OR SUPERIOR
ARTIFICIAL TURF
IN LOWER LEVEL

"EXPANDED"
CANCER CENTER
PARKING

EXISTING "IMPROVED" PARKING

MAIN ENTRANCE
CANOPY

OVERHEAD
STRING
LIGHTING

BOULDER
FOUNTAIN

RECYCLED
ANNEX BRICK
WALL

SEATING AREA & DINING

RAMP TO LOWER LEVEL

SAVED OAK TREES

SAVED TREES

CANCER CENTER
ENTRANCE
CONTROL GATES

WASTE DOCK

OUTDOOR
SOUND SYSTEM

IMPROVED EXISTING SIDEWALK

LANDSCAPE
SCREEN WITH
CREEPING
FIG ON WALL

CAPE FEAR VALLEY MAIN HOSPITAL

CANCER CENTER



THE CENTER FOR MEDICAL EDUCATION AND RESEARCH

FAYETTEVILLE, NORTH CAROLINA



Exhibit 2
CFVMC License

State of North Carolina

Department of Health and Human Services
Division of Health Service Regulation

*Effective January 01, 2020, this license is issued to
Cumberland County Hospital System, Inc.*

*to operate a hospital known as
Cape Fear Valley Medical Center
located in Fayetteville, North Carolina, Cumberland 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: 943057

License Number: H0213

Bed Capacity: 634

General Acute 524, Rehabilitation 78, Psych 28, Substance Abuse 4,

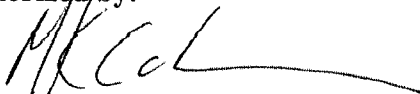
Dedicated Inpatient Surgical Operating Rooms: 5

Dedicated Ambulatory Surgical Operating Rooms: 0

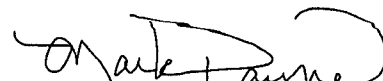
Shared Surgical Operating Rooms: 14

Dedicated Endoscopy Rooms: 4

Authorized by:



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



Director, Division of Health Service Regulation

From: [Karin Sandlin](#)
To: [Tanya Saporito](#)
Cc: [Waller, Martha K](#); [Frisone, Martha](#); [Sandy Godwin](#)
Subject: [External] Exemption Request for Cape Fear Valley Medical Center
Date: Friday, December 4, 2020 2:41:58 PM
Attachments: [12.4.2020 CFVMC Exemption Request - construct and expand ancillary and support space.pdf](#)

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to [Report Spam](#).

Hi Tanya,

Attached please find an exemption request submitted by Cumberland County Hospital System, Inc. doing business as Cape Fear Valley Medical Center (“CFVMC”) to construct and expand hospital ancillary and support space on the main campus of CFVMC.

Please let me know if you have any questions.

Thank you,

Karin Sandlin

President, Clarity Strategic Services

4208 Six Forks Road, Suite 1000, Raleigh, 27609

Mobile: 919-271-8200

ksandlin@claritysservices.com

www.claritystrategicservices.com