



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

October 2, 2020

Robert Radics
Rob.radics@fivepointshc.com

No Review

Record #: 3369
Facility Name: Five Points Home Health
FID #: 060663
Business Name: Aveanna Healthcare Senior Services, LLC
Business #: 3280
Project Description: Change in indirect ownership
County: Cumberland

Dear Mr. Radics:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence 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 that correspondence is not governed by, and therefore, does not currently require a certificate of need. 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.

You may 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.

This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office.

Please do not hesitate to contact this office if you have any questions.

Sincerely,

Tanya M. Saporito
Project Analyst

Martha J. Frisone
Chief

cc: 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

Tanya, Saporito

From: Rob Radics <rob.radics@fivepointshc.com>
Sent: Tuesday, September 29, 2020 11:09 AM
To: Tanya, Saporito
Subject: [External] RE: Request for No Review Determination dated September 18, 2020
Attachments: Notice Letter #5 - NC CON (HHA License) (Request for No Review Determination) rev 9-29-2020.pdf

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to report.spam@nc.gov

Ms. Saporito,

There was a mistake with the Project # that was provided in the original letter. I apologize for the confusion and attached is an updated letter.

Can you please provide an address to receive Fed Ex deliveries and I will overnight the original letter to you today.

Thank you,

Rob

Rob Radics
CEO



3525 Piedmont Road NE, Suite 8-515
Atlanta, GA 30305
Office: 404-692-4417 ext. 101
Cell: 404-787-1570
www.fivepointshc.com

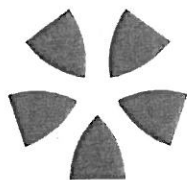
From: Tanya, Saporito <tanya.saporito@dhhs.nc.gov>
Sent: Monday, September 28, 2020 3:54 PM
To: Rob Radics <rob.radics@fivepointshc.com>
Subject: Request for No Review Determination dated September 18, 2020

Good afternoon, Mr. Radics,

Your request for an Exemption/No Review determination has been routed to me for processing. The Agency needs additional information as outlined in the attached letter before I can process your request.

Thank you in advance for your attention. Please contact me if you have any questions. My direct line is 919-855-3886.

Tanya Saporito, J.D.
Project Analyst
Division of Health Service Regulation, Certificate of Need
NC Department of Health and Human Services



FIVE POINTS
HEALTHCARE

September 29, 2020

Ms. Martha Frisone
Chief, Certificate of Need Division
Division of Health Service Regulation
North Carolina Department of Health & Human Services
2704 Mail Service Center
Raleigh, NC 27699-2704

Re: Notice of Transfer of Indirect Ownership and Request for No Review Determination for the following Certificate of Need of Five Points Healthcare of NC, LLC:
Facility ID # 060663

Dear Ms. Frisone:

We are writing to provide notice to the North Carolina Department of Health and Human Services (the “Department”), Division of Health Service Regulation, Certificate of Need Section (the “CON Section”) of an upcoming change in indirect ownership of Five Points Healthcare of NC, LLC, a Delaware limited liability company qualified to do business in North Carolina (the “Licensee”). Currently, the Licensee operates a home health agency (“HHA”) located at 3107 Raeford Road, Fayetteville, North Carolina, pursuant to a Home Health License issued by the Department (License # HC3421; Facility ID # 060663). The HHA previously received a certificate of need (“CON”) from the CON Section as specified above, and has operated in compliance with such CON.

At present, the Licensee is wholly-owned by Five Points Healthcare, LLC (“Five Points”), which, in-turn, is owned by Fulcrum Growth Fund II QP, LLC and various other minority investors (“Seller”). On or about October 18, 2020, Aveanna Healthcare Senior Services LLC, a Delaware limited liability company (“Aveanna”), intends to acquire 100% of the issued and outstanding membership interests of Five Points from Seller (the “Proposed Transaction”). We have included pre- and post-closing organizational charts for your reference documenting the proposed changes taking place in connection with the Proposed Transaction (see Exhibit A, attached hereto and incorporated herein).

Importantly, as a result of the Proposed Transaction, there will be no changes to the day-to-day operations of the Licensee. Specifically, the Licensee will continue to operate under the same name, federal tax identification number, National Provider Identifier numbers and Medicare provider numbers. Furthermore, there are no actual or anticipated changes in the management team, type/level of HHA services provided or the manner in which such services will be provided.

To this end, any equipment currently owned by the Licensee under its CON will remain in operation in accordance with past practice.

We understand that, pursuant to N.C. Gen. Stat. § 131E-1 *et seq.*, the Proposed Transaction is exempt from CON review. Accordingly, we respectfully request that the CON Section confirm the Proposed Transaction is not subject to CON review by issuing a written determination to this effect.

Please note that we have labeled the enclosed information as confidential and proprietary information that is not to be disclosed. Such notice is placed on the top of each page.

Thank you for your attention to this matter. Should you have any questions regarding the Proposed Transaction, please feel free to contact me at (404) 692-4417 x 101 or rob.radics@fivepointshc.com.

Sincerely,



Robert A. Radics
CEO

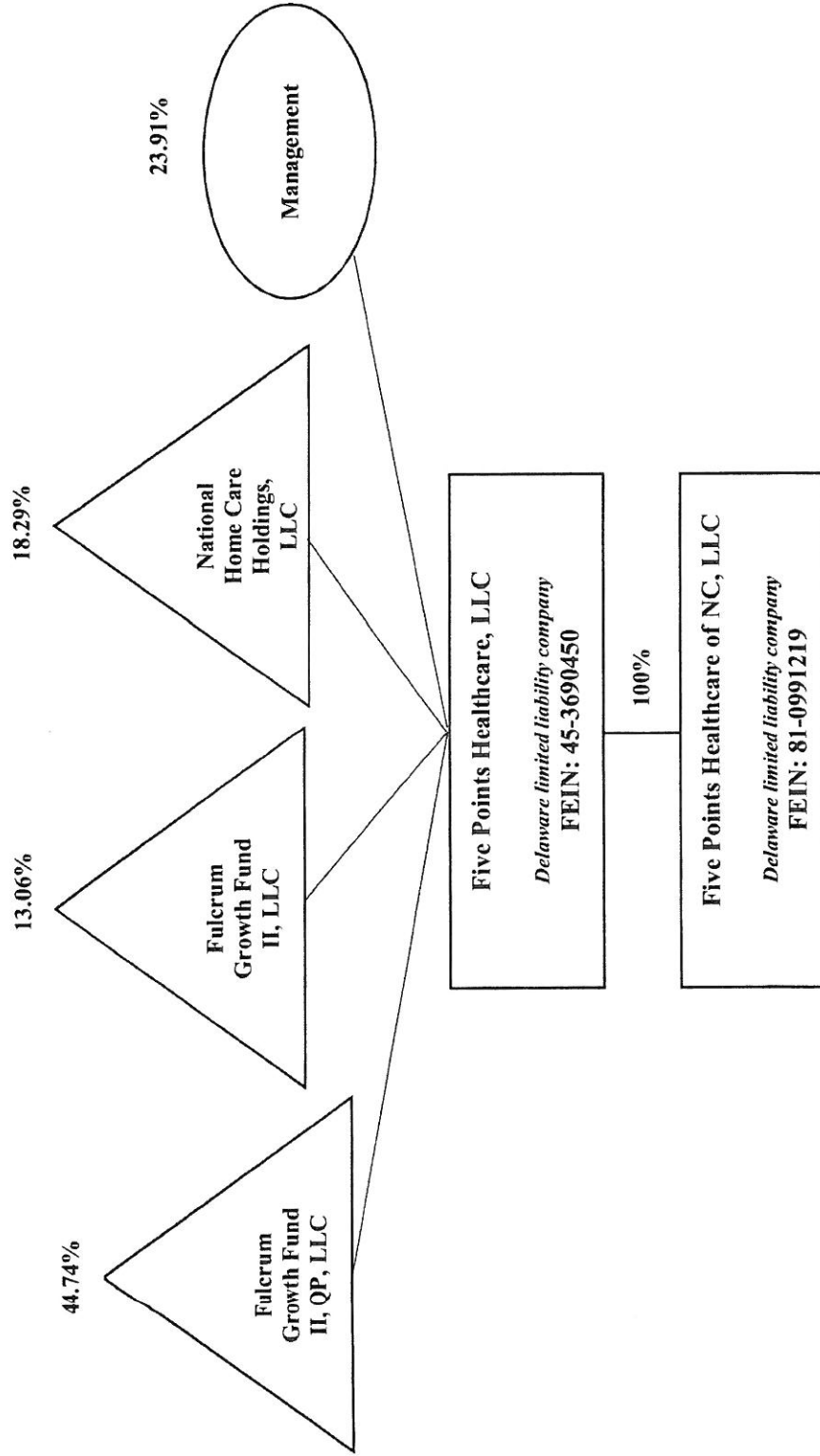
Exhibit A

Proposed Transaction Pre- and Post-Closing Organizational Charts

See attached.

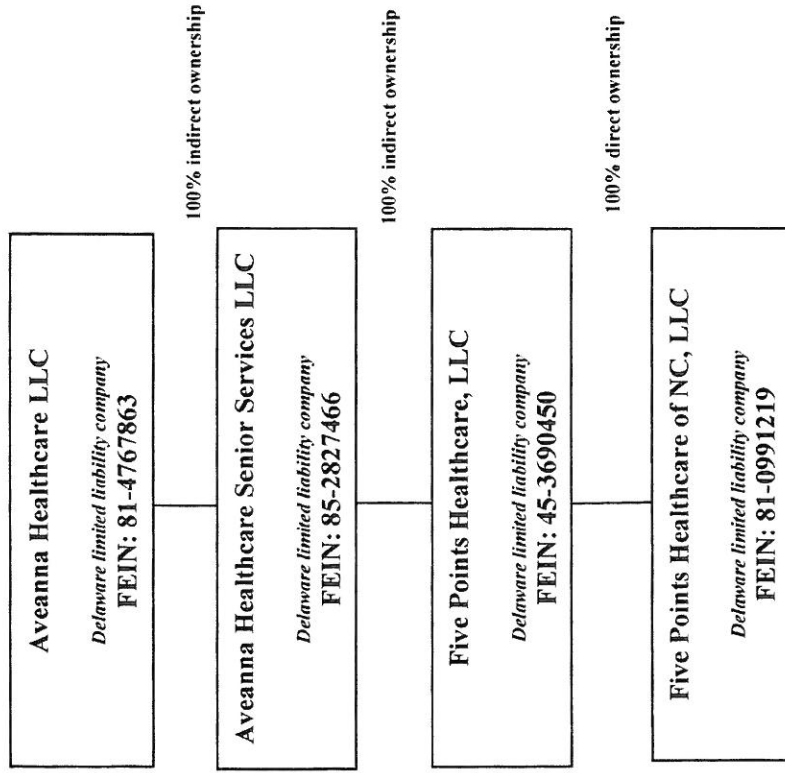
Pre-Closing Organizational Chart for Five Points Healthcare of NC, LLC

Confidential



Post-Closing Organizational Chart for Five Points Healthcare of NC, LLC

Confidential





NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

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MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

September 28, 2020

Robert A. Radics

Rob.radics@fivepointshc.com

Request for Additional Information

Facility: Five Points Home Healthcare, LLC

Project Description: Proposed change in indirect ownership

County: Cumberland

FID: 060663

Dear Mr. Radics:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter dated September 18, 2020 and received on September 22, 2020, regarding the above-referenced business and proposed change in indirect ownership of Five Points Home Health. The information contained in your request does not match the Agency's records, as described below:

1. You referenced Facility ID (FID) #060663. FID #060663 is associated with Five Points Home Health Care (formerly Native Angels Home Health, Inc.), on Purdue Drive in Fayetteville, Cumberland County.
2. You referenced Project ID #N-5545-97, which is associated with Tar Heel of Hoke County, a home health agency on Turnpike Road in Raeford, Hoke County. The FID associated with Project ID #N-5545-97 is 970202.
3. FID 060663 is therefore not associated with Project ID #N-5545-97.

Therefore, in order for the Agency to make a determination regarding your request, please clarify the information in your request.

In addition, please be advised that, subject to N.C. Gen. Stat. §132-1, information submitted to the Agency is public record. Therefore, the information contained in your request becomes public record when submitted to the Agency.¹

¹ https://www.ncleg.net/enactedlegislation/statutes/html/bychapter/chapter_132.html

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

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AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Upon receipt of the above information, the Agency will provide a response to your request. If you have any questions regarding this matter, please do not hesitate to call this office at 919-855-3873.

Sincerely,

A handwritten signature in black ink that reads "Tanya M. Saporito". The signature is written in a cursive style with a large, stylized initial 'T'.

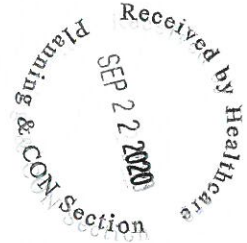
Tanya M. Saporito
Project Analyst



FIVE POINTS
HEALTHCARE

September 18, 2020

Ms. Martha Frisone
Chief, Certificate of Need Division
Division of Health Service Regulation
North Carolina Department of Health & Human Services
2704 Mail Service Center
Raleigh, NC 27699-2704



Re: Notice of Transfer of Indirect Ownership and Request for No Review Determination for the following Certificate of Need of Five Points Healthcare of NC, LLC:
Facility ID # 060663; Project # N-5545-97; Business # 2339 (as amended by, Record # 1838)

Dear Ms. Frisone:

We are writing to provide notice to the North Carolina Department of Health and Human Services (the “Department”), Division of Health Service Regulation, Certificate of Need Section (the “CON Section”) of an upcoming change in indirect ownership of Five Points Healthcare of NC, LLC, a Delaware limited liability company qualified to do business in North Carolina (the “Licensee”). Currently, the Licensee operates a home health agency (“HHA”) located at 3107 Raeford Road, Fayetteville, North Carolina, pursuant to a Home Health License issued by the Department (License # HC3421; Facility ID # 060663). The HHA previously received a certificate of need (“CON”) from the CON Section as specified above, and has operated in compliance with such CON.

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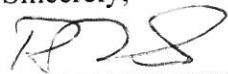
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Sincerely,



Robert A. Radics
CEO

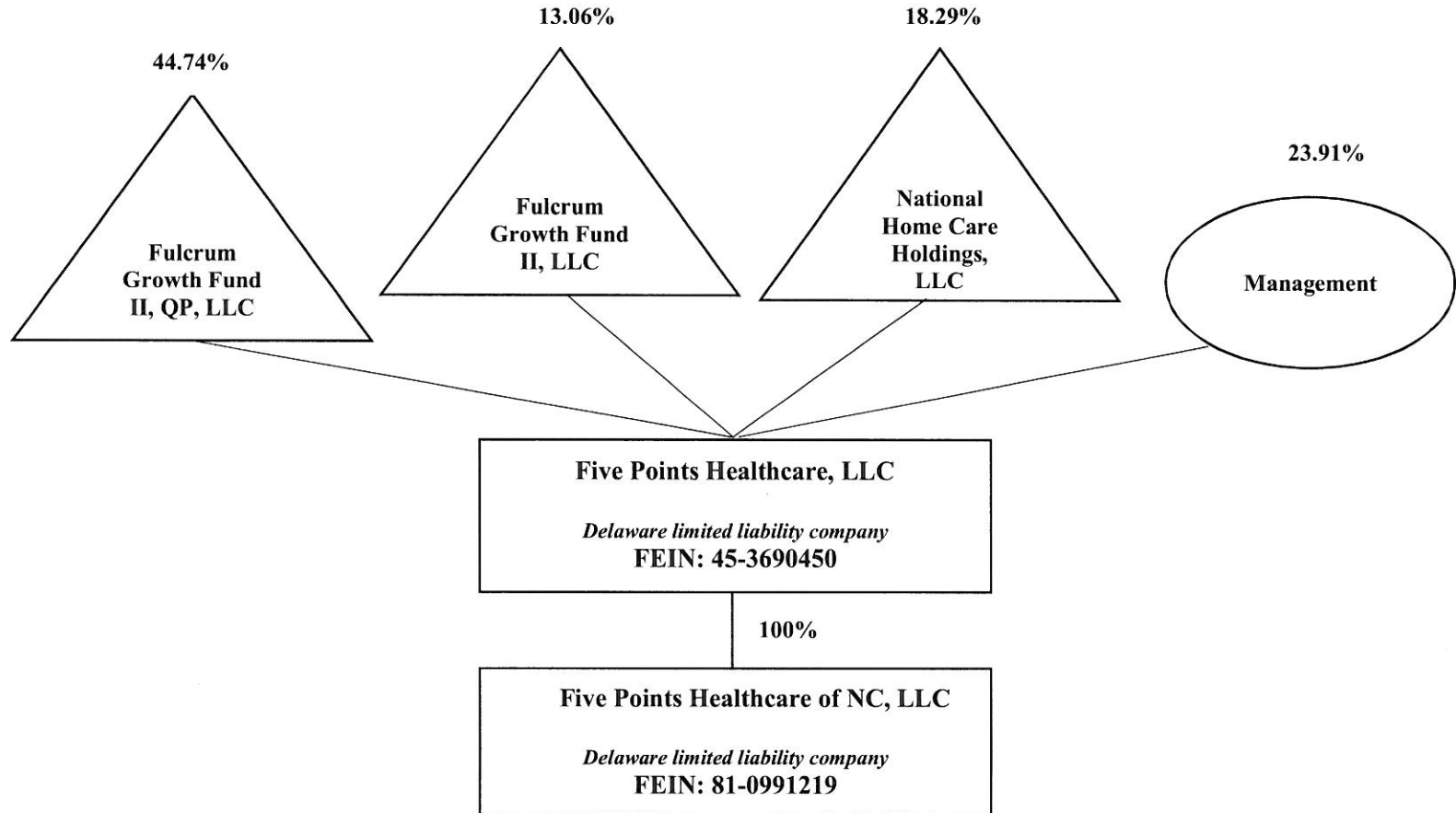
Exhibit A

Proposed Transaction Pre- and Post-Closing Organizational Charts

See attached.

Pre-Closing Organizational Chart for Five Points Healthcare of NC, LLC

Confidential



Post-Closing Organizational Chart for Five Points Healthcare of NC, LLC

Confidential

