



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

November 27, 2023

Patrick Lancaster

plancaster@gatesrehab.com

No Review

Record #: 4320
Date of Request: November 9, 2023
Facility Name: Gates Health and Rehab
FID #: 923158
Business Name: Down East LLC
Business #: 2757
Project Description: Delicense eight of 10 adult care home beds and change operator
County: Gates

Dear Mr. Lancaster:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the project described above. Based on the CON law **in effect on the date of this response to your request**, the project as described is not governed by, and therefore, does not currently require a certificate of need. The new operator of the facility is August Healthcare. 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.

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,

Gregory F. Yakaboski, Project Analyst

Micheala Mitchell, Chief

cc: Nursing Home Licensure and Certification Section, DHSR
Adult Care Licensure 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

From: [Mitchell, Micheala L](#)
To: [Stancil, Tiffany C](#)
Cc: [Pittman, Lisa](#)
Subject: FW: [External] No Need Review Letter
Date: Thursday, November 9, 2023 3:09:50 PM
Attachments: [image001.png](#)

Tiffany-

Would you mind logging this as a no review and assigning it to Greg?

Thanks,

Micheala Mitchell, JD
[NC Department of Health and Human Services](#)
[Division of Health Service Regulation](#)
Section Chief, Healthcare Planning and CON Section
809 Ruggles Drive, Edgerton Building
2704 Mail Service Center
Raleigh, NC 27699-2704
Office: 919 855 3879
Micheala.Mitchell@dhhs.nc.gov

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From: Patrick Lancaster <PLancaster@gatesrehab.com>
Sent: Thursday, November 9, 2023 12:18 PM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Cc: Pittman, Lisa <lisa.pittman@dhhs.nc.gov>
Subject: Re: [External] No Need Review Letter

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Good afternoon,

I wanted to let you know that we are decertifying them or I guess de licensing because our new total number will be 72 and we are not a CCRC at this time. Again these rooms have already been converted into offices already to. I appreciate your assistance and if you have any questions please let me know.

Thanks.

Patrick Lancaster, LNHA

Nursing Home Administrator

Gates Health and Rehab

38 Carters Road

Gatesville, NC 27938

Cell: (336)-406-8286

Facility: (252) 357-2124 ext 111

Fax: (252) 357-1436



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From: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>

Sent: Thursday, November 9, 2023 11:51 AM

To: Patrick Lancaster <PLancaster@gatesrehab.com>

Cc: Pittman, Lisa <lisa.pittman@dhhs.nc.gov>

Subject: RE: [External] No Need Review Letter

Hi Patrick,

Are you de-licensing or de-certifying beds for reimbursement purposes? Additionally, is your facility a continuing retirement care community?

Micheala Mitchell, JD

[NC Department of Health and Human Services](#)

[Division of Health Service Regulation](#)

Section Chief, Healthcare Planning and CON Section

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Micheala.Mitchell@dhhs.nc.gov

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From: Patrick Lancaster <PLancaster@gatesrehab.com>
Sent: Thursday, November 9, 2023 11:48 AM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Cc: Pittman, Lisa <lisa.pittman@dhhs.nc.gov>
Subject: [External] No Need Review Letter
Importance: High

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Good morning,

My name is Patrick Lancaster and I am the Administrator at Gates Health and Rehab located in Gatesville NC. I received you all information from Beverly Speroff from DHSR. I am requesting to see if I could receive an expedited "No Need Review" Letter for our facility due to completing the process for decertification of our Assisted Living Bed, which is 8 of them. I appreciate your assistance on this and if you have any questions or need my assistance please don't hesitate to reach out.

Thanks,

Patrick Lancaster, LNHA

Nursing Home Administrator

Gates Health and Rehab

38 Carters Road

Gatesville, NC 27938

Cell: (336)-406-8286

Facility: (252) 357-2124 ext 111

Fax: (252) 357-1436



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