



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

July 31, 2024

Tatum Myers
tmyers@thrivemorenc.org

No Review

Record #: 4492
Date of Request: July 1, 2024
Facility Name: Brookridge Retirement Community
FID #: 922961
Business Name: Baptist Retirement Homes of North Carolina, Inc.
Business #: 139
Project Description: Change 18 existing Medicare only nursing facility beds to dually certified Medicare/Medicaid nursing facility beds
County: Forsyth

Dear Ms. Myers:

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. 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,

Yolanda W. Jackson, Project Analyst

Micheala Mitchell, Chief

cc: Nursing Home 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



June 29th, 2024

Micheala Mitchell, Chief
Division of Health Service Regulation
Healthcare Planning and Certificate of Need Section
NC Department of Health and Human Services
2704 Mail Service Center Raleigh, NC 27699

Re: Request of No Review: Establishing Medicare Only Certified Beds as Dually Certified Beds at Brookridge Retirement Community

Ms. Mitchell,

On behalf of Brookridge Retirement Community (“Brookridge”), a licensed CCRC in part of Baptist Retirement Homes of NC, Inc. dba ThriveMore, this letter is intended to request a determination of no review from Certificate of Need (“CON”) review of the Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (“Agency”).

It is the intent of Brookridge to reconfigure Medicare only Certified beds to better serve the needs of Forsyth County. Brookridge Retirement Community is currently licensed at 33 dually certified beds, 18 Medicare only, 26 Licensed only and 36 ACH for a total of 113 beds. It is our desire to have 51 dually certified beds, 26 Licensed only and 36 ACH beds for a total of 113 beds.

Brookridge is working with Shonda Kelly at NC DHHS to complete the reconfiguration process. There have been no construction changes or updates to the rooms since becoming Medicare Only Certified. The Community plans to work with the Construction Section at the agency, if necessary.

Please let me know if you have any questions. Thank you for your approval in advance.

Regards,
Tatum S. Myers
Tatum Myers
Executive Director
Brookridge Retirement Community

From: [Mitchell, Micheala L](#)
To: [Stancil, Tiffany C](#)
Subject: FW: [External] Re: No Review Letter
Date: Monday, July 1, 2024 9:44:44 AM
Attachments: [Outlook-ywffzt3v.png](#)
[Outlook-t2dnprf4.png](#)
[Outlook-byI0vyuv.png](#)
[Letter of No Review Bed Change 2024.docx](#)

Morning Tiffany!

I hope you're well. This no review goes to Yolanda.

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

From: Tatum Myers <tmyers@thrivemorenc.org>
Sent: Sunday, June 30, 2024 8:38 PM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Subject: [External] Re: No Review Letter

CAUTION: External email. Do not click links or open attachments unless verified. Report suspicious emails with the Report Message button located on your Outlook menu bar on the Home tab.

Please see attached No Review Request from Brookridge Retirement Community.

Thank you,
Tatum

Tatum Myers, MBA, LNHA, CDP

Executive Director
Office Phone: 336-759-1044 EXT 202
Cell: 336-971-0596
1199 Hayes Forest Dr, Winston-Salem, NC 27106



From: Tatum Myers

Sent: Sunday, June 30, 2024 6:53 PM

To: micheala.mitchell@dhhs.nc.gov <micheala.mitchell@dhhs.nc.gov>

Subject: No Review Letter

Good Afternoon Micheala,

We are working with Shonda Kelly to transition our Medicare only beds to dually certified. She is requesting a no review letter for the project. Can you assist me with the information needed to complete this for Brookridge Retirement Community? We are a licensed CCRC.

Thank you,

Tatum

Tatum Myers, MBA, LNHA, CDP

Executive Director

Office Phone: 336-759-1044 EXT 202

Cell: 336-971-0596

1199 Hayes Forest Dr, Winston-Salem, NC 27106



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From: [Tatum Myers](#)
To: [Jackson, Yolanda W](#)
Subject: Re: [External] Re: No Review Request Brookridge Retirement Community
Date: Monday, July 8, 2024 1:47:33 PM
Attachments: [image002.png](#)
[image003.png](#)
[image004.png](#)
[image005.jpg](#)
[Outlook-q4epwrik.png](#)
[Outlook-3jhazrvf.png](#)
[Outlook-252a2kmr.png](#)

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I will go through our records as well.

Stay tuned! I apologize for the delay.

Tatum Myers, MBA, LNHA, CDP

Executive Director

Office Phone: 336-759-1044 EXT 202

Cell: 336-971-0596

1199 Hayes Forest Dr, Winston-Salem, NC 27106



From: Jackson, Yolanda W <yolanda.jackson@dhhs.nc.gov>

Sent: Monday, July 8, 2024 1:37 PM

To: Tatum Myers <tmyers@thrivemorenc.org>

Subject: RE: [External] Re: No Review Request Brookridge Retirement Community

You don't often get email from yolanda.jackson@dhhs.nc.gov. [Learn why this is important](#)

We cannot find Brookridge in our database. It appears that your certificate of need predates our database and that is why I reached out to you to get a copy.

Yolanda Jackson, JD

Project Analyst, CON

Healthcare Planning and Certificate of Need Section

Division of Health Service Regulation

[North Carolina Department of Health and Human Services](#)

(I am in the office Mondays and Tuesdays. I am working remotely on the other days, therefore email is typically the best way to reach me.)

Main Number: 919-855-3873

yolanda.jackson@dhhs.nc.gov

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From: Tatum Myers <tmyers@thrivemorenc.org>

Sent: Monday, July 8, 2024 12:38 PM

To: Jackson, Yolanda W <yolanda.jackson@dhhs.nc.gov>

Subject: [External] Re: No Review Request Brookridge Retirement Community

CAUTION: External email. Do not click links or open attachments unless verified. Report suspicious emails with the Report Message button located on your Outlook menu bar on the Home tab.

Good Afternoon,

Working on locating this. With us being a CCRC this would be our original. Normally, I would reach out to your office to obtain.

Can you assist me in pointing me to someone who may can assist?

Thank you,

Tatum

Tatum Myers, MBA, LNHA, CDP

Executive Director

Office Phone: 336-759-1044 EXT 202

Cell: 336-971-0596

1199 Hayes Forest Dr, Winston-Salem, NC 27106



From: Jackson, Yolanda W <yolanda.jackson@dhhs.nc.gov>

Sent: Monday, July 8, 2024 12:13 PM

To: Tatum Myers <tmyers@thrivemorenc.org>

Subject: RE: No Review Request Brookridge Retirement Community

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Good morning,

I am following up on the request for additional information. Could you please provide us with a copy of the certificate of need for Brookridge?

Yolanda Jackson, JD

Project Analyst, CON
Healthcare Planning and Certificate of Need Section
Division of Health Service Regulation
[North Carolina Department of Health and Human Services](#)

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From: Jackson, Yolanda W

Sent: Tuesday, July 2, 2024 9:31 AM

To: 'tmyers@thrivemorenc.org' <tmyers@thrivemorenc.org>

Subject: No Review Request Brookridge Retirement Community

Good morning,

We have received your request for a no review determination. Can you provide us with a copy of the certificate of need for Brookridge?

Yolanda Jackson, JD

Project Analyst, CON
Healthcare Planning and Certificate of Need Section
Division of Health Service Regulation
[North Carolina Department of Health and Human Services](#)

(I am in the office Mondays and Tuesdays. I am working remotely on the other days, therefore email is typically the best way to reach me.)

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