



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

September 6, 2024

Ms. Hayley Eby
Hayley.eby@agapecaregroup.com

No Review

Record #: 4569
Date of Request: September 3, 2024
Facility Name: Hospice of the Carolina Foothills
FID #: 041526
Business Name: Agape Care North Carolina, LLC
Business #: 3283
Project Description: Add Brunswick and Duplin counties to hospice service area
County: Rutherford

Dear Ms. Eby:

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 representation in your request and 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. **As a reminder, it is unlawful to offer or develop a new institutional health service without first obtaining a certificate of need. The Department reserves the right to impose sanctions, including civil penalties and the revocation of a license, upon any entity that offers or develops a new institutional health service without first obtaining a certificate of need.**

Sincerely,

Tanya M. Saporito
Project Analyst

Micheala Mitchell
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



Agape Care Group

9/3/24

Micheala Mitchell, micheala.mitchell@dhhs.nc.gov
Healthcare Planning and Certificate of Need
NC Department of Health and Human Services

RE: Expanded Geographic Service Area for Hospice of the Carolina Foothills (HOS0400)

To whom it concerns,

This letter serves to **request to expand the geographic service area to include Brunswick County**. This request is to serve a pediatric patient that we currently have a referral for. This request is to add Duplin County to the approved service areas for the license and is not a temporary request.

Unfortunately, few hospice agencies accept pediatric hospice patients. Given the current situation, there is a big need for additional support and resources for these precious patients and their families. Because of this, it is important for us to consider extending our services to those pediatric hospice patients outside of our current service area. We will always evaluate each pediatric hospice referral on an individual basis to assess the patient's needs and determine if we are able to provide the necessary care and support without the risk of any service failures before asking for permission to serve a patient in the requested county.

We have a full care team who can provide care to patients in this county.

I understand that this is a difficult decision, and we are open to discussing any concerns or questions you may have. I am confident that we can find a solution that works for everyone involved.

Thank you for your time and consideration. Any questions related to care team locations may be directed to Denise Marsh, Director of Pediatric Operations. Her phone number is 803-760-4168 and email is denise.marsh@handsofhopese.com.

Please let me know if there is anything else needed.

Thank you,

Hayley Eby

Manager of External Audits and Enrollments
Hayley.eby@agapecaregroup.com
912-506-0121

August 30, 2024

To Whom it May Concern,


We are pediatric oncologists and palliative care physicians at the University of North Carolina. We are caring for a child with a devastating brain cancer called a diffuse intrinsic pontine glioma (DIPG). This tumor is invariably fatal. Hers has progressed now several times. She is newly on a last ditch, experimental therapy that may slow the tumor's growth but will very likely not cure her. The family is fully aware of this and is reasonably devastated.

She has been receiving hospice services in her home community for months through an adult hospice program, Lower Cape Fear LifeCare. We are growing increasingly concerned that this experienced adult hospice group is approaching this pediatric patient and her family like they would an adult. We contend that pediatric and adult palliative care and end-of-life care are distinctly different. Whereas concurrent care is not allowed for adult hospice, it is for pediatric hospice. This distinction changes the way we, as pediatric providers, talk about hope, about trying various things. We aim to be real and tell the truth, but we tend to avoid over-reminding our patients how dismal the prognosis is and how the end result will invariably be death.

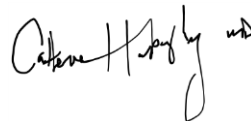
As such, we are writing to advocate for pediatric-specific hospice services for our patient. Hands of Hope, which is Hospice of the Carolina Foothills pediatric hospice program, provides pediatric-specific care. In our experience, that care is exceptional. They are not currently able to provide hospice in Brunswick County. Hands of Hope is hoping to be able to offer pediatric hospice services for this county, which we fully support.

Please don't hesitate to contact me for further information.

Kind regards,



David Kram, MD, MCR
Pediatric Neuro-Oncology
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(919) 966-1178
dkram@med.unc.edu



Catherine Habashy, MD
Pediatric Oncology & Palliative Medicine
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From: [Mitchell, Micheala L](#)
To: [Stancil, Tiffany C](#)
Subject: FW: [External] Request to add service area for Pediatric Patient HOS0400
Date: Tuesday, September 3, 2024 3:49:16 PM
Attachments: [image003.png](#)
[ACNC HOCF add area 9.3.24.pdf](#)

Tiffany would you mind logging and assigning this to Tanya?

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: Hayley Eby <hayley.eby@agapecaregroup.com>
Sent: Tuesday, September 3, 2024 3:09 PM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Cc: Denise Marsh <denise.marsh@handsofhopese.com>
Subject: [External] Request to add service area for Pediatric Patient HOS0400

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,

Attached, you will find our request to add a service area for Pediatric Hospice services. I have also attached a letter from the Physician requesting approval for our care of this patient.

I understand your office is still working on service area approvals at this time, but we respectfully ask that this request be placed at a high priority due to the condition of the patient.

Thank you.

Hayley Eby
Manager of External Audits and Enrollments
hayley.eby@agapecaregroup.com
Mobile: 912-506-0121



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