



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

JOSH STEIN • Governor
DEV DUTTA SANGVAI • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY
CORRECTED

January 29, 2026

Robert Leandro
robbleandro@parkerpoe.com

No Review – Qualified Urban Ambulatory Surgical Facility

Record #: 5014
Date of Request: November 21, 2025
Facility Name: Clearview Surgical Center
Facility Address: 802 Green Valley Road, Greensboro 27408
Business Name: Clearview Surgical Eye Center, LLC
Business #: 4022
Project Description: Develop a qualified urban ambulatory surgical facility
County: Guilford

Dear Mr. Leandro:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the development of a qualified urban ambulatory surgical facility. Pursuant to NCGS §131E-176(21a), a qualified urban ambulatory surgical facility is an ambulatory surgical facility that meets all of the following criteria:

- a. Is licensed by the Department to operate as an ambulatory surgical facility.
b. Has a single specialty or multispecialty ambulatory surgical program.
c. Is located in a county with a population greater than 125,000 according to the 2020 federal decennial census or any subsequent federal decennial census.

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.

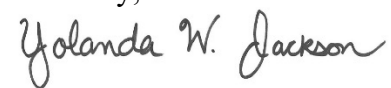
This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office. As a reminder,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

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

LOCATION: 1915 Health Services Way, Raleigh, NC 27607
MAILING ADDRESS: 1915 Health Services Way, 2704 Mail Service Center, Raleigh, NC 27699-2704
www.ncdhs.gov/dhsr • TEL: 919-855-3873

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

Sincerely,



Yolanda W. Jackson
Project Analyst



Micheala Mitchell
Chief

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

Jackson, Yolanda W

From: Leandro, Robert A. <robbleandro@parkerpoe.com>
Sent: Wednesday, January 14, 2026 5:52 PM
To: Stancil, Tiffany C
Cc: Jackson, Yolanda W
Subject: [External] RE: 5014 Guilford Clearview Surgical Center No Review

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I have two corrections that I would like to make to this request, although it does not materially change the request.

First, the address we provided was off a bit. Our letter stated that the address was 820 Green Valley Road, Greensboro, NC. I reversed the numbers inadvertently and the address is **802** Green Valley Road, Greensboro NC. Second, the letter did not correctly identify the corporate name. The physician group that is associated with this ASC will be Piedmont Eye Surgical and Laser, PLLC as noted, but the ASC will be licensed under Clearview Surgical Eye Center, LLC and Clearview is not a d/b/a of Piedmont but a separate LLC. Neither of these revisions should change the Agency's analysis but I did want to let you know.

Robert Leandro
Partner

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From: Stancil, Tiffany C <Tiffany.Stancil@dhhs.nc.gov>
Sent: Tuesday, December 9, 2025 12:10 PM
To: Leandro, Robert A. <robbleandro@parkerpoe.com>
Cc: Jackson, Yolanda W <yolanda.jackson@dhhs.nc.gov>; Conley, Azzie <azzie.conley@dhhs.nc.gov>;

SVC_DHHS.DHSR.Construction.Admin <DHSR.Construction.Admin@dhhs.nc.gov>; DHSR.SMFP.HealthCarePlanning <DHSR.SMFP.HealthCarePlanning@dhhs.nc.gov>

Subject: 5014 Guilford Clearview Surgical Center No Review

*****Caution: External email*****

Tiffany Stancil

Administrative Specialist I

[Division of Health Service Regulation](#), Healthcare Planning and CON Section

[\[ncdhhs.gov/\]](#)NC Department of Health and Human Services

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[Know the 3 Ws. Wear. Wait. Wash.](#)

#StayStrongNC and get the latest at [nc.gov/covid19](#).

Office: 919-855-3872

Tiffany.Stancil@dhhs.nc.gov

1915 Health Services Way

2704 Mail Service Center

Raleigh, NC 27607

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NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

JOSH STEIN • Governor
DEV DUTTA SANGVAI • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

December 9, 2025

Robert Leandro
robleandro@parkerpoe.com

No Review – Qualified Urban Ambulatory Surgical Facility

Record #: 5014
Date of Request: November 21, 2025
Facility Name: Clearview Surgical Center
Facility Address: 820 Green Valley Road, Greensboro 27408
Business Name: Piedmont Eye Surgical and Laser, PLLC
Business #: 4022
Project Description: Develop a qualified urban ambulatory surgical facility
County: Guilford

Dear Mr. Leandro:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the development of a qualified urban ambulatory surgical facility. Pursuant to NCGS §131E-176(21a), a qualified urban ambulatory surgical facility is an ambulatory surgical facility that meets all of the following criteria:

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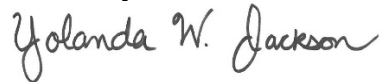
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

LOCATION: 1915 Health Services Way, Raleigh, NC 27607
MAILING ADDRESS: 1915 Health Services Way, 2704 Mail Service Center, Raleigh, NC 27699-2704
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offers or develops a new institutional health service without first obtaining a certificate of need.

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

Sincerely,



Yolanda W. Jackson
Project Analyst



Micheala Mitchell
Chief

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

Jackson, Yolanda W

From: Leandro, Robert A. <robbleandro@parkerpoe.com>
Sent: Wednesday, December 3, 2025 10:07 AM
To: Jackson, Yolanda W
Subject: [External] RE: No Review Request for Clearview Surgical Center QUASF

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Ms. Jackson,

I apologize for the delay in getting back to you. The address is 820 Green Valley Road, Greensboro, NC 27408

Robert Leandro
Partner

Find our latest health care analysis [here](#)



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From: Jackson, Yolanda W <yolanda.jackson@dhhs.nc.gov>
Sent: Wednesday, December 3, 2025 9:43 AM
To: Leandro, Robert A. <robbleandro@parkerpoe.com>
Subject: RE: No Review Request for Clearview Surgical Center QUASF

*****Caution: External email*****

Good morning,

Could you please share the planned street address for the proposed QUASF? Even if a street number isn't available, the street name alone would be helpful.

Yolanda Jackson, JD
Project Analyst
[Division of Health Service Regulation](#)
Healthcare Planning and Certificate of Need Section
[North Carolina Department of Health and Human Services](#)
Main Number: 919-855-3873

(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.)

NCDHHS provides essential services to improve the health, safety and well-being of all North Carolinians. Learn more about [NCDHHS initiatives and priorities](#).

More than 600,000 more people have enrolled in health coverage since Dec. 1, 2023. Learn more at [Medicaid.ncdhhs.gov](#).

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From: Jackson, Yolanda W
Sent: Tuesday, November 25, 2025 9:45 AM
To: Leandro, Robert A. <robbbleandro@parkerpoe.com>
Subject: No Review Request for Clearview Surgical Center QUASF

Good morning,

We are reviewing the no review request for Clearview Surgical Center. Could you provide me with the planned address for the ambulatory surgical facility?

Thank you

Yolanda Jackson, JD
Project Analyst
[Division of Health Service Regulation](#)
Healthcare Planning and Certificate of Need Section
[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: 919-855-3873
yolanda.jackson@dhhs.nc.gov

1915 Health Services Way, 2nd floor
2704 Mail Service Center
Raleigh, NC 27699-2704

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Robert A. Leandro
Partner
t: 919.835.4520
f: 919.834.4564
donnayeager@parkerpoe.com

Atlanta, GA
Charleston, SC
Charlotte, NC
Columbia, SC
Greenville, SC
Raleigh, NC
Spartanburg, SC

November 21, 2025

VIA ELECTRONIC MAIL

Micheala Mitchell
Health Planning and Certificate of Need
Section
North Carolina Department
of Health and Human Services
2704 Mail Service Center
Raleigh, North Carolina 27699-2704
Micheala.Mitchell@dhhs.nc.gov

Re: **Request for No Review Determination**

Dear Ms. Mitchell

This letter is intended to provide notice to the Certificate of Need Section that our client Piedmont Eye Surgical and Laser, PLLC d/b/a Clearview Surgical Center ("Clearview") plans to develop an ambulatory surgical center in Guilford County, North Carolina, which has a population in excess of 125,000.

Pursuant to Session Law 2023-7, as codified in N.C. Gen. Stat. §§ 131E-176 (9b)(16),(21a) and N.C. Gen. Stat. § 131E-178(a), as of November 21, 2025, ambulatory surgical facilities ("ASFs") that are developed in counties with a population of 125,000 or greater are considered "Qualified Urban Ambulatory Surgical Facilities" and are no longer required to obtain a CON.

Clearview requests that the CON Section confirm that the develop of an ASC in Guilford County is not subject to Certificate of Need ("CON") review. If you have any questions, please feel free to give me a call. I greatly appreciate your attention to this matter.

Sincerely,

A handwritten signature in black ink that reads 'Rob A. Leandro'.

Robert A. Leandro

RAL:klb

PPAB 5192015v1

From: [Mitchell, Micheala L](#)
To: [Stancil, Tiffany C](#)
Subject: FW: [External] FW: Your scan file is attached
Date: Friday, November 21, 2025 12:52:23 PM
Attachments: [image376716.png](#)
[MyScan.pdf](#)

Tiffany,

Would you mind logging and assigning this one to Yolanda? I think I have one more left. I may get more this afternoon.

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: Leandro, Robert A. <robbleandro@parkerpoe.com>
Sent: Thursday, November 20, 2025 5:09 PM
To: Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Subject: [External] FW: Your scan file is attached

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Micheala,

Please find attached No Review Letter.

Robert Leandro
Partner

Find our latest health care analysis [here](#)



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