



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

January 29, 2026

Bernice Hosch
Bernice.hosch@yahoo.com

Exempt from Review – Acquisition of Facility

Record #: 5066
Date of Request: January 15, 2026
Facility Name: Golden Years Rest Home
Type of Facility: Adult Care Home
FID #: 920442
Acquisition by: CCJ Adult Care V LLC
Business #: 4044
County: Cleveland

Dear Ms. Hosch:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that the project described above is exempt from certificate of need (CON) review in accordance with G.S. 131E-184(a)(8). Therefore, the above referenced business may proceed to acquire the health service facility identified above without first obtaining a CON. The facility will be operated by Bernice Hosch. The Agency’s determination is limited to the question of whether the above referenced business would have to obtain a CON if the current owners of the health service facility do in fact sell it to the business listed above. Note that pursuant to G.S. 131E-181(b): “A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.”

If the business listed above does acquire the facility, you should contact the Agency’s Adult Care Licensure Section to obtain instructions for changing ownership of the existing facility.

It should be noted that this Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this Agency and a separate determination regarding whether a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Ena Lightbourne

Ena Lightbourne
Project Analyst

Micheala Mitchell

Micheala Mitchell
Chief

cc: Adult Care Licensure Section, DHSR

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.ncdhhs.gov/dhsr • TEL: 919-855-3873

Lightbourne, Ena

From: Bernice Hosch <bernice.hosch@yahoo.com>
Sent: Wednesday, January 28, 2026 2:30 PM
To: Lightbourne, Ena
Subject: [External] Re: Golden years Rest Home-No Review Request [SECOND REQUEST]

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Yes to both of your questions and I will be the new operator

[Sent from Yahoo Mail for iPhone](#)

On Wednesday, January 28, 2026, 8:49 AM, Lightbourne, Ena <ena.lightbourne@dhhs.nc.gov> wrote:

Good morning Ms. Hosch. Have you had a chance to review this request? Please see below.

Thank you.

Ena Lightbourne

Project Analyst, CON

Healthcare Planning and Certificate of Need Section

Division of Health Service Regulation

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

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

Main: 919-855-3873

Ena.lightbourne@dhhs.nc.gov

1915 Health Services Way, 2nd floor

2704 Mail Service Center

Raleigh, NC 27699-2704

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From: Lightbourne, Ena
Sent: Wednesday, January 21, 2026 1:51 PM
To: 'bernice.hosch@yahoo.com' <bernice.hosch@yahoo.com>
Subject: Golden years Rest Home-No Review Request

Hi Ms. Hosch. This is regarding your recent request for a No Review related to the facility listed above. I just need to clarify some items. The request states that there will be a change in the licensee. Will CCJ Adult Care V LLC be acquiring the facility (brick and mortar)? Also, is there a change to the operator? Can you provide me with the name of the operator?

Thank you.

Ena.

Ena Lightbourne

Project Analyst, CON

Healthcare Planning and Certificate of Need Section

Division of Health Service Regulation

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

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Golden Years Rest Home
630 Sugar Hill Road
Lawndale NC 28090
Facility# HAL-023-041

January 15, 2026

To the CON Division,

This letter serves as formal notification that Golden Years Rest Home will undergo a licensee change effective February 01, 2026.

This Facility will change ownership from Golden Years Rest Home to CCJ Adult Care V LLC dba Golden Years Rest Home; License Number HAL-023-041.

Please note that no structural changes have been made or will be made at this Facility. This change applies solely to the licensee information for

Golden Years Rest Home 12-Bed Facility located at 630 Sugar Hill Road Lawndale NC 28090 License Number HAL-023-041.

If you have any questions or need additional information, please feel free to contact Bernice Hosch 980-295-3020

Email: bernice.hosch@yahoo.com

*Bernice Hosch
January 15, 2026*

From: [Bernice Hosch](#)
To: [Stancil, Tiffany C](#); [Lightbourne, Ena](#)
Subject: [External] CON Letter
Date: Thursday, January 15, 2026 4:06:59 PM
Attachments: [CON Letter DHHS 1-15-26.pdf](#)

You don't often get email from bernice.hosch@yahoo.com. [Learn why this is important](#)

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Good evening, please see CON letter attached.

Bernice R Hosch
Administrator/Operator
PO Box 74 Bessemer City NC 28016
CCJ Adult Care LLC-St Marks Rd Care
CCJ Adult Care II LLC-OpenView Retirement Home
CCJ Adult Care III LLC-Greene Haven Family Care Home
CCJ Adult Care IV LLC- Walden Pond Care Home
Cell 980-295-3020 Fax 704-406-9372