



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

Merrill Seyler
Merrill.Seyler@authoracare.org

No Review

Record #: 5068
Date of Request: January 21, 2026
Facility Name: AuthoraCare Collective
Business Name: AuthoraCare Collective
Business #: 3913
Project Description: Expand home health and hospice services to Davie County
County: Davie

Dear Ms. Seyler:

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.

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

Sincerely,
Yolanda W. Jackson
Yolanda W. Jackson
Project Analyst

Michelle Mitchell

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

Micheala Mitchell  
Chief

cc: Acute and Home Care Licensure and Certification Section, DHSR



January 21, 2026

Department of Health and Human Services  
Division of Health Service Regulation, Healthcare Planning and Certificate of Need Section  
809 Ruggles Drive  
2701 Mail Service Center  
Raleigh, NC 27699-2701

To Whom It May Concern,

AuthoraCare Collective would like to request a letter of no review to expand home health and hospice services, into a contiguous county to our current service areas, which includes Alamance, Caswell, Chatham, Davidson, Durham, Forsyth, Guilford, Orange, Person, Randolph, Rockingham and Stokes counties, without opening another site. This county is Davie County.

We do understand that the hospice licensure regulations provide that the agency must offer its full scope of hospice services in its entire geographic service area. We will provide the full scope of our hospice services as we do throughout our service area today. We will also update our written policies to identify the expanded service area. We fully commit to meeting all the Conditions of Participation as set forth by Medicare for certified hospice organizations.

We did want to reiterate our strong commitment to adhering to all regulations set forth by DHSR.

Sincerely,

Merrill Seyler



[authoracare.org](http://authoracare.org)  800.588.8879

Burlington | 336.532.0100 | 914 Chapel Hill Rd, Burlington, NC 27215

Greensboro | 336.621.2500 | 2500 Summit Ave, Greensboro, NC 27405

Formerly Hospice & Palliative Care Center of Alamance-Caswell & Hospice and Palliative Care of Greensboro

**From:** [Mitchell, Micheala L](#)  
**To:** [Stancil, Tiffany C](#)  
**Subject:** FW: [External] Request a Letter of No Review  
**Date:** Thursday, January 22, 2026 4:59:20 PM  
**Attachments:** [image001.png](#)  
[accservicelineunlockuplogo\\_c7db3f58-65fb-4a31-b929-efaadc397360.png](#)  
[qc2024\\_12782984-cb14-45ad-8070-f9f9d868b4cc.png](#)  
[Signed Letter to CON for No Review.docx](#)  
[image002.png](#)

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Would you mind logging this and assigning to Yolanda tomorrow?

Thanks,

Micheala

**Micheala Mitchell, JD**

*(she/her/hers)*

Section Chief, Healthcare Planning and CON Section  
Division of Health Service Regulation  
North Carolina Department of Health and Human Services

Physical Address:

1915 Health Services Way, 2<sup>nd</sup> Floor  
Raleigh, NC 27607



2704 Mail Service Center  
Raleigh, NC 27699-2704

Office: 919 855 3879

[Micheala.Mitchell@dhhs.nc.gov](mailto:Micheala.Mitchell@dhhs.nc.gov)

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**From:** Merrill Seyler <Merrill.Seyler@authoracare.org>  
**Sent:** Wednesday, January 21, 2026 12:39 PM  
**To:** Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>

**Cc:** Merrill Seyler <Merrill.Seyler@authoracare.org>

**Subject:** [External] Request a Letter of No Review

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January 21, 2026

Department of Health and Human Services  
Division of Health Service Regulation, Healthcare Planning and Certificate of Need Section  
809 Ruggles Drive  
2701 Mail Service Center  
Raleigh, NC 27699-2701

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We did want to reiterate our strong commitment to adhering to all regulations set forth by DHSR.



Sincerely,

Merrill Seyler

**Merrill Seyler, RN, BSN, MHA**

VP of Quality and Compliance

336-478-2510, 2510



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