CO2018-061 RECEIVED May 24 2018

Arnall Golden Gregory LLP

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

Atlanta Office 171 17th Street NW, Suite 2100 Atlanta, GA 30363-1031 Direct phone: 404.873.8598 Direct fax: 404.873.8599 E-mail: alex.foster@agg.com

May 22, 2018

### EL107645958US

### VIA U.S. EXPRESS MAIL AND EMAIL

Ms. Karen W. McGuire State Health Planning and Development Post Office Box 303025 Montgomery, Alabama 36130-3025 Email: Karen.McGuire@shpda.alabama.gov

Re: Alabama Hospice Agencies / Changes in Indirect Ownership Interest

Dear Ms. McGuire:

We are writing on behalf of CH Services Group Holdings, Inc. and its subsidiaries ("Curo") to notify you of a proposed transaction (the "Transaction") that will result in a change in ultimate control and indirect ownership interests of the hospice operators listed on Attachment A and B (the "Operators").

The Transaction will cause a change in indirect ownership interests multiple levels above the Operators. Under the Transaction, a consortium comprised of TPG Capital ("TPG"), Welsh, Carson, Anderson & Stowe ("WCAS"), Humana Inc. ("Humana") and certain other minority investors (collectively the "Shareholder Group") will acquire control of CH Services Group Holdings, Inc. Please see <u>Attachment C and D</u> for diagrams reflecting the pre- and post-closing structures. Note that the Transaction is expected to close in <u>July 2018</u>.

Enclosed please find Change of Control Applications for the parent Operators listed on Attachment A. Based on our telephone call on April 10, 2018, we understand Applications are only required for parent hospices and that branch hospices (included at Attachment B) do not require a separate Application.

As discussed on our April 30, 2018, telephone call, we understand that, if the Shareholder Group decides to re-organize or change the proposed organizational structure (as indicated in <u>Attachment D</u>) to include additional intermediate entities, any proposed changes may be submitted for your review in a separate filing. We also understand that any proposed re-organization that <u>does not change the ultimate control and ownership interests in the Certificates of Need (which would continue to be held by the Shareholder</u>

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Group as proposed), will not be considered a Change in Indirect Ownership Interest requiring further Certificate of Need review.

We also respectfully request that your consideration of any proposed reorganization that may be submitted not delay your approval of the enclosed filings for a Change in Indirect Ownership Interest.

In a separate communication, change-of-information CMS-855As will be submitted to the assigned Medicare Administrative Contractor and, where required, the applicable state Medicaid agency to report this change.

Thank you for your attention to this matter. Should you have any questions, please do not hesitate to contact me.

Sincerely,

ARNALL GOLDEN GREGORY LLP

Alexander B. Foster

cc: Douglas Abell, Esq. (Curo Health Services)

Carol Saul, Esq.

Susan W. Berson, Esq. (Counsel to TPG and WCAS)

Robert Belfort, Esq. (Counsel to Humana)

# ATTACHMENT A

	£18	£03	7	389	390
	015-P2418	013-P2403	127-P2417	071-P2389	073-P2390
d /	36207-3800	36037-2313	35504-2517	35768-2611	35173-3606
eE.	ΑL	AL	ΑΓ	ΥΓ	ΑΓ
	Anniston	Greenville	Jasper	Scottsboro	Trussville
	Unit A		Units 3 & 4		Suite 129
To Supply	1419 Leighton Avenue	501 E. Commerce St.	300 North Airport Road	1602 S. Broad Street	4735 Norrel Drive
	Parent	Parent	Parent	Parent	Parent
Table Names	SouthernCare New Beacon - Anniston	SouthernCare Greenville	SouthernCare New Beacon - Jasper	SouthernCare New Beacon - Scottsboro	SouthernCare New Beacon - N. Birmingham
	New Beacon Healthcare Group, ILC	SouthernCare, Inc.	New Beacon Healthcare Group, LLC	New Beacon Healthcare Group, LLC	New Beacon Healthcare Group, LLC

# ATTACHMENT B

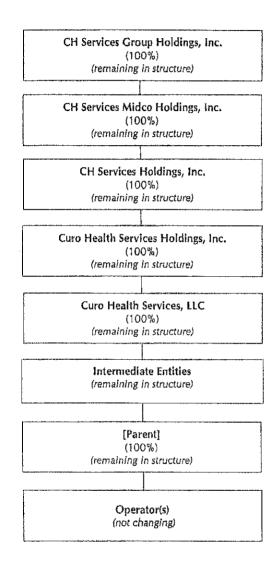
	NEUR NEUR			A(107-172				
New Beacon Healthcare Group, LLC	SouthernCare New Beacon Alexander City	Branch of Anniston	124 Aliant Parkway		Alexander City	PΓ	35010-3158	015- P2418B
New Beacon Healthcare Group, LLC	SouthernCare New Beacon Gadsden	Branch of Anniston	412 South 5th Street		Gadsden	٦F	35901-5102	015- P2418C
SouthemCare, Inc.	SouthernCare Andalusia	Branch of Greenville	109 Medical Park Drive	STEA	Andalusia	AL	36420-5323	013- P2403A
SouthemCare, Inc.	SouthernCare Atmore	Branch of Greenville	1321 S. Main Street	STE 4	Atmore	AL	36502-2812	003- P2329A
SouthernCare, Inc.	SouthernCare Daphne	Branch of Greenville	101 Villa Dr.	Suite A	Daphne	AL	36526-4653	003- P2329
Southern Care, Inc.	SouthernCare Dothan	Branch of Greenville	2576 Montgomery Hwy	Suite 2	Dothan	AL	36303-2633	069- P2361
SouthernCare, Inc.	SouthernCare Enterprise	Branch of Greenville	1253 Rucker Blvd.	Suite A	Enterprise	ΑĽ	36330-3766	031- P1603
SouthernCare, Inc.	SouthernCare Grove Hill	Branch of Greenville	179-B Jackson Street		Grove Hill	ΑĽ	36451-3009	025- P2360
SouthernCare, Inc.	Southern Care Mobile	Branch of Greenville	3938A Government Blvd	Suite 103	Mobile	¥.	36693-4383	097- P4904
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New Beacon Healthcare Group, LLC	SouthernCare New Beacon S. Birmingham	Branch of Jasper	1280 Columbiana Road	Suite 110	Birningharn	AL.	35216-1642	127- P2417A
New Beacon Healthcare Group, LLC	Southern Care New Beacon Demopolis	Branch of Jasper	927 Hwy 80 West		Demopolis	ΑĽ	36732-4102	127- P2417B
New Beacon Healthcare Group, LLC	SouthernCare New Beacon Tuscaloosa	Branch of Jasper	3835 Watemelon Road	Suite 3 and 4	Northport	AL	35473-5001	127- P2417C
New Beacon Healthcare Group, LLC	SouthemCare New Beacon Selma	Branch of Jasper	1013 Medical Center Parkway	Bldg 1, STE 101	Selma	٩٢	36701-6742	091- P2424A
								-1
New Beacon Healthcare Group, LLC	SouthernCare New Beacon Decatur	Branch of Scottsboro	1316 Somerville Rd. SE	Suite 4	Decatur	Α	35601-4309	071- P2389D
New Beacon Healthcare Group, LLC	SouthernCare New   Beacon Quad Cities	Branch of Scottsboro	239 Azalea Drive		Florence	٧٢	35630-1733	071- P2389C
New Beacon Healthcare Group, LLC	SouthemCare New Beacon Cullman		417 Main Street		Hanceville	۸Ľ	35077-5459	071- P238A
New Beacon Healthcare Group, LLC	SouthernCare New Beacon Huntsville	Branch of Scottsboro	200 West Side Square	Suite 440	Huntsville	ΨΓ	35801-4864	071- P2389B
								-



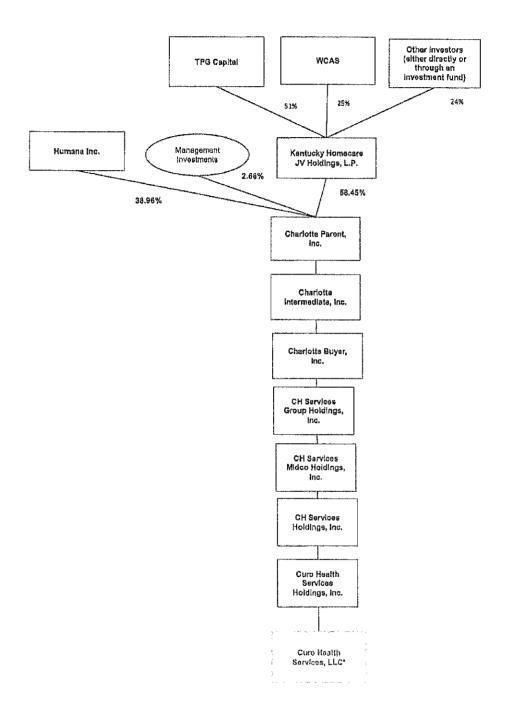
New Reacon Healthcare Croun 11C	SouthernCare New	Branch of	122 7th Avenue	Suite D	Alabaster	٩٢	35007-9121	117.
	Beacon - Alabaster	Trussville	¥				***************************************	P2416
New Beacon Healthcare Group, LLC	Southern Care New	Branch of	201 Medical		Clanton	Αľ	35045-2329	021-
	Beacon Clanton	Trussville	Center Drive					P2327
New Beacon Healthcare Group, LLC	Southern Care New	Branch of	7067 Sydney	Suite B	Montgomery	٦	36117-3509	101.
	Beacon Montgomery	Trussville	Curve					P2436
New Beacon Healthcare Group, LLC	SouthernCare New	Branch of	630 Old		Sylacauga	\   	35150-2484	117-
	Beacon - Sylacauga	Trussville	Birmingham			~~~	- 600	P2416A
			Highway			eleatros Per		

### ATTACHMENT C

### Curo - Current Ownership Structure



### ATTACHMENT D



<sup>\*</sup>Please see Attachment C for the entities below Curo Health Services, LLC.

### AL NOTICE OF CHANGE OF OWNERSHIP/CONTROL

## SOUTHERNCARE, INC. DBA SOUTHERNCARE GREENVILLE

State Health Planning and Development Agency

Alabama CON Rules & Regulations

### NOTICE OF CHANGE OF OWNERSHIP/CONTROL

The following notification of intent is provided pursuant to all applicable provisions of ALA. CODE § 22-21-270 (1975 as amended) and ALA. ADMIN. CODE r. 410-1-7-.04. This notice must be filed at least twenty (20) days prior to the transaction.

Change in Direct Ownership or Control (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e)) Change in Certificate of Need Holder (ALA, CODE § 22-20-271(f)) Change in Facility Management (Facility Operator) Any transaction other than those above-described requires an application for a Certificate of Need. Part I: Facility Information 013-P2403 SHPDA ID Number: (This can be found at www.shptla.alahama.gov, Health Care Data, ID Codes) Name of Facility/Provider: SouthernCare, Inc. (See Attachment A) (ADPH Licensure Name) 501 E Commerce Street Physical Address: Greenville, AL 36037 Butler County of Location: None / Not Applicable (Hospice Agency) Number of Beds/ESRD Stations: CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional See Attachment A (no change) pages if necessary. Part II: Current Authority (Note: If this transaction will result in a change in direct ownership or control, as defined under ALA. CODE § 22-20-271(e), please attach organizational charts outlining current and proposed structures.) Owner (Entity Name) of SouthernCare, Inc. Facility named in Part I: 655 Brawley School Rd., Ste. 200 Malling Address: Mooresville, NC 28117 SouthernCare, Inc. Operator (Entity Name): Part III: Acquiring Entity Information SouthernCare, Inc. (No Change) Name of Entity: 655 Brawley School Rd., Ste. 200 Mailing Address:

Mooresville, NC 28117

Operator (Entity Name):	SouthernCare, Inc. (No Change)
Proposed Date of Transaction is on or after:	July 2018
Part IV: Terms of Purchase	
Monetary Value of Purchase:	\$ 5,744,373
Type of Beds:	Hospice Agency
Number of Beds/ESRD Stations:	None/Not Applicable (Hospice Agency)
Financial Scope: to Include Prelimina Construction, and Yearly Operating Cos	ary Estimate of the Cost Broken Down by Equipment, t:
Projected Equipment Cost:	\$0
Projected Construction Cost;	\$ 0
Projected Yearly Operating Cost:	\$ .10,595,034.
Projected Total Cost:	\$ 10,595,034
On an Attached Sheet Please A	Address the Following: See Attachment B
1.) The services to be offered by the prooffered the service, whether the service the service is a new service).	oposal (the applicant will state whether he has previously is an extension of a presently offered service, or whether
2.) Whether the proposal will include the	addition of any new beds.
3.) Whether the proposal will involve the	conversion of beds.
4.) Whether the assets and stock (if any	) will be acquired,
Part V: Certification of Informat	lon
Current Authority Signature(s):	
Owner(s): Operator(s):	tion is true and correct to the best of my knowledge and
Title/Date: Gusti McGee Director of Regulatory	Services
SouthernCare, Inc.	

SWORN to and subscribed before me, this 12<sup>Th</sup> day of A P P. 11. 2018

Notary Public

My Commission Expires: Aug. 7, 2021

My Commission Expires: Aug. 7, 2021

Regree to Bernard Mishall for reporting of all services provided during the current annual reporting period, as specified in AlA. Admin, Code r. 410-1-3-12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s):

Operator(s):

Title/Date: Gusti McGee

Director of Regulatory Services

SouthernCare, Inc.

SWORN to and subscribed before me, this 12<sup>Th</sup> day of APRIL

OTAP

My Commission Expires: Aug. 7, 2021

My Commission Expires: Aug. 7, 2021

Author: Alva M. Lambert

Statutory Authority: § 22-21-271(c), Code of Alabama, 1975

History: New Rule

# Attachment A - Greenville

Legal Griffy Name	DBA Name	Status	Address	Address	ô	State	Zip	SHPDA No.	Counties Served
SouthemCare, Inc.	SouthernCare Greenville	Parent	501 E. Commerce St.		Greenville	J.	36037-2313	013- P2403	Butler, Baldwin, Barbour, Choctaw, Clarke, Coffee, Conecuh, Covington, Crenshaw, Dale, Escambia, Geneva, Henry, Houston, Mobile, Monroe, Washington, Wilcox
SouthernCare, Inc.	SouthernCare Andalusia	Branch of Greenville	109 Medical Park Drive	STE A	Andalusia	VT.	36420-5323	013- P2403A	Covington
SouthernCare, Inc.	Southern Care Atmore	Branch of Greenville	1321 S. Main Street	STE 4	Atmore	AL	36502-2812	013- P2403F	Escambia, Baldwin, Mobile
Southern Care, Inc.	Southern Care Daphne	Branch of Greenville	101 Villa Dr.	Suite A	Daphne	AL.	36526-4653	013- P2403D	Baldwin, Escambia, Mobile
SouthernCare, Inc.	SouthernCare Dothan	Branch of Greenville	2576 Montgomery Hwy	Suite 2	Dothan	AL	36303-2633	013- P2403G	Houston, Barbour, Coffee, Henry, Dale, Geneva
SouthernCare, Inc.	Southern Care Enterprise	Branch of Greenville	1253 Rucker Blvd.	Suite A	Enterprise	A	36330-3766	013- P2403B	Coffee
SouthernCare, Inc.	SouthernCare Grove Hill	Branch of Greenville	179-B Jackson Street	-	Grove Hill	ΑΓ	36451-3009	013- P2403E	Clarke, Choctaw, Monroe, Washington, Wilcox
SouthemCare, Inc.	SouthemCare Mobile	Branch of Greenville	393&A Government Blvd	Suite 103	Mobile	- AL	36693-4383	013- P2403C	Mobile

#### Attachment B - Greenville

### Responses to Application Questions 1 through 4

1) The services to be offered by the proposal (the applicant will state whether he has previously offered the service, whether the service is an extension of a presently offered service, or whether the service is a new service).

The Applicant, SouthernCare, Inc. d/b/a SouthernCare Greenville, has previously offered the service and the hospice services offered will not change.

2) Whether the proposal will include the addition of any new beds.

The transaction will not include the addition of any new beds.

3) Whether the proposal will involve the conversion of beds.

The transaction will not involve the conversion of beds.

4) Whether the assets and stock (if any) will be acquired.

The transaction involves a change of indirect owners of an existing licensed hospice provider, as a result of a stock transfer.