

Sep 27 2019

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September 27, 2019

VIA U.S. EXPRESS MAIL & EMAIL

Alva M. Lambert, Esq., Executive Director Alabama State Health Planning and Development Agency P.O. Box 303025 Montgomery, Alabama 36130-3025 Email: shpda.online@shpda.alabama.gov

Re: Alabama Hospice Providers / Proposed Change in Certain Indirect Owners

Dear Executive Director Lambert:

We are writing on behalf of the hospices listed in Attachment A (the "Hospices") to inform you of a change in certain indirect owners of the licensees for each of the Hospices, which is scheduled to occur on or about November 1, 2019 (the "Transaction").

There will be no change to the entities listed on the respective hospice licenses and no change in the direct ownership of the licensees. The change in certain indirect owners will take place multiple levels above the licensees in the corporate structure. The licensees will continue to exist, and the current Medicaid provider agreements will remain in place. The licensees' federal tax identification numbers will not change. In addition, other than changes resulting in the ordinary course of business, there will be no changes to hospice staff for the licensees and the Hospices' day-to-day operations will not be impacted as a result of the change in indirect ownership. Attached is a diagram that depicts the proposed changes.

Please find enclosed a Notice of Change of Ownership/Control filing for each <u>parent</u> hospice along with required fee. Please let us know if you need any additional information prior to these changes taking place.

Thank you for your attention to this matter.

Sincerely,

//// / 4 .

Arnali Golden Gregory LLP

Alexander B. Foster

Enclosures

CC:

Russell Adkins, Esq. Hedy Rubinger, Esq.

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ATTACHMENT A

Legal Entity Name	DBA Name	Address	Status	SHPDA No
Hospice Advantage EAMC LLC	Compassus - Auburn	665 Opelika Road, Suite 200, Auburn, AL 36830	Parent	081-P2322
Hospice Advantage EAMC LLC	Compassus - Auburn Bethany House	1171 Gatewood Drive, Blg 100, Auburn, AL 36830	Branch of Auburn	
HC Healthcare LLC	Compassus - Florence	507 East Drive Hicks Blvd, Florence, AL 35630	Parent	077-P2340
HC Healthcare LLC	Compassus - Huntsville	7262 Governors West Drive, Huntsville, AL 35758	Branch of Florence	
Hospice Advantage, LLC	Compassus - Troy	1340 Hwy 231 South, Suite 7 Troy, AL 36081	Parent	109-P2440
Life Choice Hospice of Alabama, LLC	Compassus - Gadsden	1735 Highway 77, Southside AL 35907	Parent	055-P2489
Life Choice Hospice of Alabama, LLC	Compassus - Roanoke	4455 Hwy 431, Suite 3, Roanoke, AL 36274	Branch of Roanoke	
Compassus OP of Alabama LLC	Compassus Hospice and Palliative Care -Birmingham	1400 Urban Center Drive, Suite 100 Vestavia Hills, AL 35242	Parent	073-P2470
Compassus OP of Alabama LLC	Compassus Hospice Care Suite	4941 Montevallo Road Birmingham, AL 35210	Branch of Birmingham	

ATTACHMENT A

Hospice Name	Hospice Identification	
Hospice Advantage EAMC, LLC d/b/a Compassus - Auburn	CO2019-058 SHPDA ID: 081-P2322	
Compassus OP of Alabama, LLC d/b/a Compassus Hospice and Palliative Care – Birmingham	CO2019-062 073-P2470	
HC Healthcare LLC	CO2019-059	
d/b/a Compassus – Florence	SHPDA ID: 077-P2340	
Life Choice Hospice of Alabama, LLC	CO2019-061	
d/b/a Compassus – Gadsden	SHPDA ID: 055-P2489	
Hospice Advantage, LLC	CO2019-060	
d/b/a Compassus – Troy	SHPDA ID: 109-P2440	

State Health Planning and Development Agency

Alabama CON Rules & Regulations

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

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 Certificate of Need Hol	ontrol (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e)) der (ALA. CODE § 22-20-271(f)) Facility Operator) e-described requires an application for a Certificate of Need.	
Part I: Facility Information		
SHPDA ID Number: (This can be found at www.shpda.alabama.gov.		
Name of Facility/Provider: (ADPH Licensure Name)	Compassus OP of Alabama LLC d/b/a Compassus Hospice and Palliative Care - Birmingham	
Physical Address:	1400 Urban Center Drive, Suite 100	
	Vestavia Hills, AL 35242	
County of Location:	Jefferson	
Number of Beds/ESRD Stations:	None / Not Applicable (Hospice Agency)	
CON Authorized Service Area (Home Hogges if necessary. Bibb, Blount, Control of the Bibb, Blount, Cont	Branch site has 10 IPU beds lealth and Hospice Providers Only). Attach additional Chilton, Jefferson, Shelby, St. Clair, Tuscaloosa, Walker	
Part II: Current Authority (Not ownership or control, as defined under charts outlining current and proposed st	te: If this transaction will result in a change in direct ALA. CODE § 22-20-271(e), please attach organizational ructures.)	
Owner (Entity Name) of Facility named in Part I:	Compassus OP of Alabama LLC	
Mailing Address:	10 Cadillac Drive, Suite 400	
	Brentwood, TN 37027	
Operator (Entity Name):	Compassus OP of Alabama LLC	
Part III: Acquiring Entity Inform	ation	
Name of Entity:	Compassus OP of Alabama LLC (No Change)	
Mailing Address:	10 Cadillac Drive, Suite 400	

Brentwood, TN 37027

Title/Date:

Operator (Entity Name):	Compassus OP of Alabama LLC (No Change)
Proposed Date of Transaction is on or after:	November 1, 2019
Part IV: Terms of Purchase	
Monetary Value of Purchase:	\$ <u>6,379,472</u>
Type of Beds:	Hospice Agency
Number of Beds/ESRD Stations:	None / Not Applicable (Hospice Agency); Branch site has 10 IPU beds
Financial Scope: to Include Prelimina Construction, and Yearly Operating Cos	ary Estimate of the Cost Broken Down by Equipment,
Projected Equipment Cost:	\$ 0
	\$_0
Projected Yearly Operating Cost:	
Projected Total Cost:	\$ 5,948,467
On an Attached Sheet Please A 1.) The services to be offered by the pro offered the service, whether the service i the service is a new service). 2.) Whether the proposal will include the a 3.) Whether the proposal will involve the c	posal (the applicant will state whether he has previously s an extension of a presently offered service, or whether addition of any new beds.
1.) Whether the assets and stock (if any)	will be acquired.
Part V: Certification of Information	on
Current Authority Signature(s):	
he information contained in this notification	on is true and correct to the best of my knowledge and
Owner(s): Russel (1)	
perator(s): Burn Co	
itle/Date: General Counsel 9	3/27/19

SWORN to and subs	cribed before me, this 27th	day of September	2019
(Seal) Acquiring Authority	STATE OF TENNESSEE NOTARY PUBLIC Son cov	Notary Public My Commission Ex	pires: 9-6-22
periou, as specified	ible for reporting of all servic in ALA. ADMIN. CODE r. 41 I correct to the best of my kn	0-1-3- 12 The information	rent annual reporting on contained in this
Purchaser(s):		_	
Operator(s):			
Title/Date:			
SWORN to and subsc	ribed before me, this 27th	day of September	2019
(Seal)		Notary Public	
		My Commission Exp	ires:

Author: Alva M. Lambert

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

History: New Rule

(Seal)

Notary Public

My Commission Expires:

Acquiring Authority Signature(s):

I agree to be responsible 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):

Russell Adkins

Operator(s):

Russell Adkins

Brad Ca

SWORN to and subscribed before me, this 25th day of October

2019

(Seal)

Title/Date:



Notary Public

My Commission Expires: 9-6-2022

Author: Alva M. Lambert

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

History: New Rule

Birmingham

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, Compassus OP of Alabama LLC d/b/a Compassus Hospice and Palliative Care – Birmingham, 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.

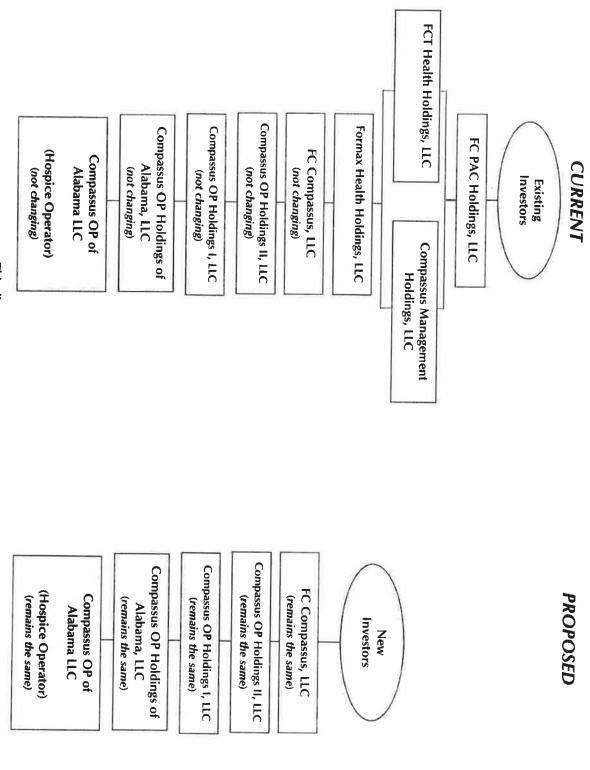
3) Whether the proposal will involve the conversion of beds.

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.

Summary Overview of Change in Certain Indirect Owners ALABAMA



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This diagram presents the restructuring generalized terms. Please let us know if you would like additional information regarding the restructuring.