



CO2024-031

RECEIVED

July 26, 2024

STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

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July 26, 2024

Via Email (shpda.online@shpda.alabama.gov)

Emily T. Marsal, Executive Director
Alabama State Health Planning &
Development Agency
100 North Union Street, Suite 870
Montgomery, Alabama 35104

**Re: Notice of Change of Ownership
Camden Nursing Facility, Inc.**

Dear Ms. Marsal:

We respectfully submit this letter to the Alabama State Health Planning and Development Agency ("SHPDA") as an attachment to the Notice of Change of Ownership form that we are filing pursuant to the Alabama Certificate of Need Program Rules and Regulations (the "CON Rules") Chapter 410-1-7-.04. The proposed change of ownership involves the purchase of the 95-bed skilled nursing facility located in Camden, Wilcox County, Alabama and known as Camden Nursing Facility (the "Facility"). The following summarizes the transaction proposed to take place and addresses SHPDA requirements under the CON Rules for change of ownership.

I. Facts

1. The Facility is currently owned by We Care of Camden, Inc. ("Current Owner") and operated by Camden Nursing Facility, Inc. (the "Current Operator") pursuant to a lease agreement between Current Owner and Current Operator (Current Owner and Current Operator, collectively, the "Seller").
2. Seller and Sasser Properties at Camden, LLC ("Purchaser") have entered into an asset purchase agreement (the "APA") for the sale of substantially all of the assets used in the operation of the Facility (the "Transaction").

3. Simultaneously with the Commencement (as defined below), Purchaser shall lease the Facility under a lease agreement ("Lease Agreement") to The Pines of Camden, LLC ("New Operator") so that the New Operator will be responsible for the operation of the Facility as of the Commencement.
4. Under certain documents to be negotiated and entered into in order to effectuate the Transaction, subject to approval by the Alabama Department of Public Health ("ADPH") and the issuance of a license to New Operator to operate the Facility as a 95-bed skilled nursing facility, the Transaction will become effective on or after September 30, 2024 (the "Commencement").
5. The resulting "change in control" requires notification to your agency pursuant to Ala. Admin. Code 410-1-7-.04(1). The change in control will be documented by the attached executed change of ownership form.

II. Financial Scope of Project.

As outlined in the attached change of ownership form, this Transaction does not involve the purchase of new equipment or other capital expenditures in excess of the applicable spending thresholds set forth in ALA. CODE § 22-21-263(a)(2). As disclosed in the attached change of ownership form, it is anticipated that first year annual operating costs will be approximately \$6,010,420.22 which does not represent an increase in such annual operating costs in excess of the applicable spending threshold.

III. No New Services to be Offered.

The Transaction does not involve the offering of any new services by the Facility. The Facility will continue to operate as a skilled nursing facility.

IV. No New Beds or Conversion of Beds.

The Transaction does not involve any addition or reduction of beds. The Transaction does not involve the conversion of any beds.

V. Acquisition of Stock and Assets.

Other than as described above, the Transaction does not involve the acquisition of stock or assets relating to the operation of the Facility.

Based on the above showing that there will be no change in health service, no conversion of beds or increase in bed capacity, or any capital expenditure in excess of the applicable spending thresholds set forth in *Alabama Code* § 22-21-263(a)(2), we respectfully request that you exercise your authority under Chapter 410-1-7-.04(2) of the CON Rules and determine that a new Certificate of Need is not required for the

Emily T. Marsal
July 26, 2024
Page 3

consummation of the above-described Transaction. In accordance with the CON Rules, the Purchaser has paid the filing fee of \$2,500 through SHPDA's online payment portal.

If you have any questions or need any additional information, please let me know.

Sincerely,

A handwritten signature in black ink, appearing to read 'BAJ', with a long, sweeping horizontal stroke extending to the right.

Brandon A. Jackson
Attorney for Purchaser and New Operator

BAJ/acr

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

SHPDA ID Number: 131-N0002
(This can be found at www.shpda.alabama.gov, Health Care Data, ID Codes)

Name of Facility/Provider: Camden Nursing Facility, Inc.
(ADPH Licensure Name)

Physical Address: 550 Ponderosa Drive
Camden, Alabama 36726

County of Location: WILCOX

Number of Beds/ESRD Stations: 95

CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages if necessary. N/A

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 Facility named in Part I: We Care of Camden, Inc.

Mailing Address: 3008 7th Avenue South
Birmingham, Alabama 35203

Operator (Entity Name): Camden Nursing Facility, Inc.

Part III: Acquiring Entity Information

Name of Entity: Sasser Properties at Camden, LLC

Mailing Address: 4776 Springhill Road
Brantley, Alabama 36009

Operator (Entity Name): The Pines of Camden, LLC

Proposed Date of Transaction is on or after: 08/31/2024

Part IV: Terms of Purchase

Monetary Value of Purchase: \$ Fair Market Value

Type of Beds: Skilled Nursing Facility

Number of Beds/ESRD Stations: 95

Financial Scope: to Include Preliminary Estimate of the Cost Broken Down by Equipment, Construction, and Yearly Operating Cost:

Projected Equipment Cost: \$ 0.00

Projected Construction Cost: \$ 0.00

Projected Yearly Operating Cost: \$ 6,010,420.22


Projected Total Cost: \$ 6,010,420.22

On an Attached Sheet Please Address the Following:

- 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).
- 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 Information**Current Authority Signature(s):**

The information contained in this notification is true and correct to the best of my knowledge and belief.

Owner(s):	<u>We Care of Camden, Inc.</u>	
Operator(s):	<u>Camden Nursing Facility, Inc.</u>	<u>Richard Brackman</u>
Title/Date:	<u>President</u>	<u>07/25/2024</u>

SWORN to and subscribed before me, this 24th day of July, 2024



Janice L. Riviere
Notary Public

My Commission Expires: 2/18/2026

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): Sasser Properties at Camden, LLC

Operator(s): The Pines of Camden, LLC

Title/Date: Manager 07/25/2024

SWORN to and subscribed before me, this _____ day of _____, _____.

(Seal)

Notary Public

My Commission Expires: _____

Author: Alva M. Lambert

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

History: New Rule

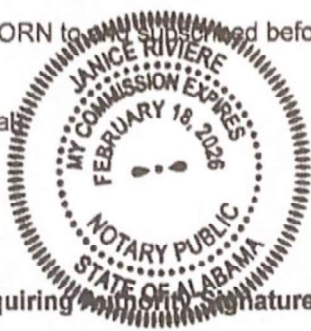
SWORN to and subscribed before me, this

24th

day of

July2024

(Seal)

Janice L. Riviere
Notary PublicMy Commission Expires: 2/18/2026

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): Sasser Properties at Camden, LLCSal Lee Sasser-WilliamsOperator(s): The Pines of Camden, LLCSal Lee Sasser-WilliamsTitle/Date: Manager07/25/2024

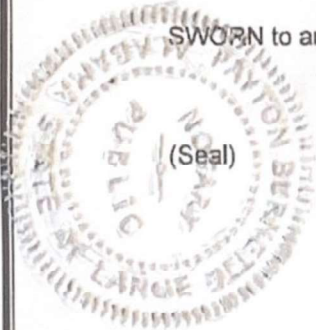
SWORN to and subscribed before me, this

25

day of

July24

(Seal)

Dayton Buennette
Notary PublicMy Commission Expires: 02-24-26

Author: Alva M. Lambert

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

History: New Rule