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CO2025-015  
**RECEIVED**  
**Jan. 28, 2025**

STATE HEALTH PLANNING AND  
DEVELOPMENT AGENCY

420 North 20th Street  
Suite 3400  
Birmingham, AL 35203

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Office (205) 251-3000  
Fax (205) 458-5100

BURR.COM

January 28, 2025

**VIA EMAIL ONLY**

Ms. Emily T. Marsal  
Executive Director  
State Health Planning and Development Agency  
100 North Union Street, Suite 870  
Montgomery Alabama 36104  
[shpda.online@shpda.alabama.gov](mailto:shpda.online@shpda.alabama.gov)

**Re: Notice of Change of Ownership  
Madison at The Range Memory Care  
089-S4516  
Anticipated Effective Date: February 27, 2025**

Dear Ms. Marsal:

I respectfully submit this Notice of Change of Ownership pursuant to Section 410-1-7-.04 of the Rules and Regulations of the Alabama Certificate of Need Program (the "CON Rules") in anticipation of the proposed transaction described below. The Change of Ownership involves Madison at The Range Memory Care, a 42 bed specialty care assisted living facility ("SCALF") located at 10803 County Line Road, Madison, Alabama 35758 (Madison County) (the "Facility"). The following is a summary of the proposed transaction:

I. Scope of the Transaction

1. Shepherd Living at the Range, LLC received CON 2801-SCALF on October 12, 2017, to operate 10 SCALF beds, CON 2815-SCALF on February 20, 2018 to operate 14 SCALF beds, and CON 2846-SCALF on October 15, 2018 to operate 18 SCALF beds, for a total of 42 SCALF beds. See Attachment A.
2. On or around June 21, 2019, a change of ownership was approved by SHPDA transferring ownership of the CON rights and operations of the Facility from Shepherd Living at the Range to Atlas Senior Living, LLC (“Atlas”). Atlas is the current licensee of the Facility.
3. No earlier than February 27, 2025, 1818 Titan Range Propco, LLC (“1818 Titan Range Propco”) will purchase the real estate comprising the Facility (including the improvements, structures, and fixtures thereon). No earlier than February 27, 2025, 1818 Titan Range Opco, LLC (“1818 Titan Range Opco”) will purchase all of the personal property, contractual and operational rights, and other transferrable assets concerning the operation of the Facility. Following the transaction, 1818 Titan Range Opco will become the licensee of the Facility.
4. It is contemplated that the transaction will be effective no earlier than February 27, 2025, or upon receipt of all governmental authorizations and certifications required, whichever is later.

II. Financial Scope of the Project

1818 Titan Range Propco will purchase the real estate for a to-be-determined fair market value price. 1818 Titan Range Opco will purchase the personal property and assets for a to-be-determined fair market value price. 1818 Titan Range Opco will lease the real estate from 1818 Titan Range Propco under an operating lease with customary terms and conditions for this type of transaction.

Other than as described herein, the Change of Ownership transaction will not involve new construction, the purchase of any new equipment, or the incurrence of new operating costs. Current expenditures are not expected to increase as a result of this transaction.

III. Services to be Offered

1. The proposed transaction does not involve the offering of any new institutional health services. A 42-bed SCALF will continue to be operated at 10803 County Line Road Madison, Alabama following the transaction.
2. 1818 Titan Range Propco and 1818 Titan Range Opco do not currently provide SCALF services.
3. The proposed transaction will not result in the addition or reduction of beds.
4. The proposed transaction will not involve the conversion of beds.
5. As set forth above, the proposed transaction involves the purchase of real estate and personal property and assets, as necessary for continued, seamless operation of the Facility. The proposed transaction does not include the sale of stock.

Ms. Emily T. Marsal  
January 28, 2025  
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In accordance with the CON Rules, payment in the amount of \$2,500.00 for the Change of Ownership Filing fee is being submitted via the SHPDA Electronic Payment Portal. Attached as Attachment B please find an executed Notice of Change of Ownership form.

Based on the facts presented above, I respectfully request that you exercise your authority under § 410-1-7-.04 of the CON Rules and determine that neither a certificate of need, nor any further certificate of need regulatory review, is required for the consummation of the above-described proposed transaction.

Should you have any questions or need further information, please feel free to contact me at (205) 458-5429 or at [kfleming@burr.com](mailto:kfleming@burr.com).

Sincerely,



Kelli C. Fleming

KCF/caj  
Attachments

# **Attachment A**

**ALABAMA  
STATE HEALTH PLANNING & DEVELOPMENT AGENCY  
CERTIFICATE OF NEED  
FOR HEALTH CARE SERVICES**

**I. IDENTIFICATION**

1. Certificate of Need 2801-SCALF	2. Date Issued: October 12, 2017	3. Termination Date: October 11, 2018
4. Project Number: AL2017-020	5. Name of Facility: Shepherd Living at The Range, LLC	
6. Service Area: Madison County	7. Location of Facility: 10803 County Line Road Madison, AL 35758	
8. Type of Facility: SCALF	9. Number of Beds: 10	10. Estimated Cost: \$28,749,916.00
11. Services to be provided: Convert ten (10) assisted living beds to ten (10) specialty care assisted living beds pursuant to a Settlement Agreement.		

**II. CERTIFICATE OF NEED**

The decision of the Administrative Law Judge, Mark T. Waggoner, in the contested case hearing proceeding shall be considered the final decision of SHPDA pursuant to § 22-21-275(14) Code of Alabama, 1975, as amended.

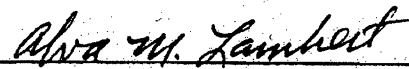
As set forth in the September 27, 2017 Order of the Administrative Law Judge Mark T. Waggoner, the Administrative Law Judge concludes that:

1. The proposed facility is consistent with the appropriate *Alabama State Health Plan* in effect at the time the application was filed.
2. That less costly, more efficient or more appropriate alternatives to such inpatient services are not available, and that the development of such alternatives has been studied and found not practicable.
3. That existing inpatient facilities providing inpatient services similar to those proposed are being used in an appropriate and efficient manner consistent with community demands for services.
4. That in the case of new construction, alternatives to new construction have been considered and have been implemented to the maximum extent practicable.
5. That patients will experience serious problems in obtaining inpatient care of the type proposed in the absence of the proposed new service.

**III. ISSUANCE OF CERTIFICATE OF NEED**

This Certificate of Need is issued to **Shepherd Living at The Range, LLC** only, for a period not to exceed 12 months from the date of issuance. This Certificate of Need is not transferable and any action on the part of the Applicant to transfer this Certificate of Need will render the Certificate of Need null and void.

ORIGINAL

  
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Alva M. Lambert  
Executive Director

**ALABAMA**  
**STATE HEALTH PLANNING & DEVELOPMENT AGENCY**  
**CERTIFICATE OF NEED**  
**FOR HEALTH CARE SERVICES**

**I. IDENTIFICATION**

1. Certificate of Need 2815-SCALF	2. Date Issued: February 20, 2018	3. Termination Date: February 19, 2019
4. Project Number: AL2017-038	5. Name of Facility: Shepherd Living at The Range, LLC	
6. Service Area: Madison County	7. Location of Facility: 10803 County Line Road Madison, Alabama 35758	
8. Type of Facility: SCALF	9. Number of Beds: 14	10. Estimated Cost: \$28,749,916.00
11. Services to be provided: Convert fourteen (14) assisted living facility beds to fourteen (14) specialty care assisted living beds as part of a new one hundred twenty-four (124) bed Assisted Living Facility currently under construction in Madison, Alabama, pursuant to a Settlement Agreement.		

**II. CERTIFICATE OF NEED**

The decision of the Administrative Law Judge, Stan McDonald, in the contested case hearing proceeding shall be considered the final decision of SHPDA pursuant to § 22-21-275(14) Code of Alabama, 1975, as amended.

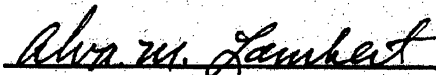
As set forth in the February 2, 2018 Order of the Administrative Law Judge, Stan McDonald, the Administrative Law Judge concludes that:

1. The proposed facility is consistent with the appropriate *Alabama State Health Plan* in effect at the time the application was filed.
2. That less costly, more efficient or more appropriate alternatives to such inpatient services are not available, and that the development of such alternatives has been studied and found not practicable.
3. That existing inpatient facilities providing inpatient services similar to those proposed are being used in an appropriate and efficient manner consistent with community demands for services.
4. That in the case of new construction, alternatives to new construction have been considered and have been implemented to the maximum extent practicable.
5. That patients will experience serious problems in obtaining inpatient care of the type proposed in the absence of the proposed new service.

**III. ISSUANCE OF CERTIFICATE OF NEED**

This Certificate of Need is issued to **Shepherd Living at The Range, LLC** only, for a period not to exceed 12 months from the date of issuance. This Certificate of Need is not transferable and any action on the part of the Applicant to transfer this Certificate of Need will render the Certificate of Need null and void.

**ORIGINAL**

  
 Alva M. Lambert, Executive Director

**ALABAMA**  
**STATE HEALTH PLANNING & DEVELOPMENT AGENCY**  
**CERTIFICATE OF NEED**  
**FOR HEALTH CARE SERVICES**

**I. IDENTIFICATION**

1. Certificate of Need 2846-SCALF	2. Date Issued: October 15, 2018	3. Termination Date: October 14, 2019
4. Project Number: AL2018-025	5. Name of Facility: Shepherd Living at The Range, LLC	
6. Service Area: Madison County	7. Location of Facility: 10801 County Line Road Madison, Alabama 35758	
8. Type of Facility: SCALF	9. Number of Beds: 18	10. Estimated Cost: \$203,753.00
11. Services to be provided: The applicant is seeking to add eighteen (18) specialty care assisted living facility (SCALF) beds for the construction of a senior retirement community in Madison, Alabama. The new facility will consist of eighty-two (82) assisted living facility beds and forty-two (42) specialty care assisted living facility (SCALF) beds, twenty-four (24) of which had Certificates of Need issued October 12, 2017 and February 20, 2018.		

**II. CERTIFICATE OF NEED**

The decision of the Administrative Law Judge, Branch D. Kloess, in the contested case hearing proceeding shall be considered the final decision of SHPDA pursuant to §22-21-275(14), Code of Alabama, 1975, as amended.

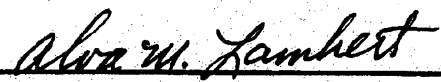
As set forth in the September 30, 2018 Order of the Administrative Law Judge, Branch D. Kloess, the Administrative Law Judge concludes that:

1. The proposed facility is consistent with the appropriate *Alabama State Health Plan* in effect at the time the application was filed.
2. That less costly, more efficient or more appropriate alternatives to such inpatient services are not available, and that the development of such alternatives has been studied and found not practicable.
3. That existing inpatient facilities providing inpatient services similar to those proposed are being used in an appropriate and efficient manner consistent with community demands for services.
4. That in the case of new construction, alternatives to new construction have been considered and have been implemented to the maximum extent practicable.
5. That patients will experience serious problems in obtaining inpatient care of the type proposed in the absence of the proposed new service.

**III. ISSUANCE OF CERTIFICATE OF NEED**

This Certificate of Need is issued to **Shepherd Living at The Range, LLC** only, for a period not to exceed 12 months from the date of issuance. This Certificate of Need is not transferable and any action on the part of the Applicant to transfer this Certificate of Need will render the Certificate of Need null and void.

**ORIGINAL**

  
Alva M. Lambert, Executive Director



# **Attachment B**

**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: 089-S4516  
(This can be found at [www.shpda.alabama.gov](http://www.shpda.alabama.gov), Health Care Data, ID Codes)

Name of Facility/Provider: Madison at The Range Memory Care  
(ADPH Licensure Name)

Physical Address: 10803 County Line Road  
Madison, Alabama 35758

County of Location: MADISON 

Number of Beds/ESRD Stations: 42

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: Atlas Senior Living, LLC

Mailing Address: 2222 Arlington Avenue South, #200  
Birmingham, Alabama 35205

Operator (Entity Name): Atlas Senior Living, LLC

**Part III: Acquiring Entity Information**

Name of Entity: 1818 Titan Range Opco, LLC

Mailing Address: 10803 County Line Road  
Madison, Alabama 35758

Operator (Entity Name): 1818 Titan Range Opco, LLC

Proposed Date of Transaction is on or after: 02/27/2025

**Part IV: Terms of Purchase**

Monetary Value of Purchase: \$ Fair Market Value

Type of Beds: SCALF

Number of Beds/ESRD Stations: 42

**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: \$ 0.00

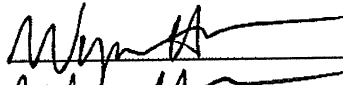
Projected Total Cost: \$ 0.00

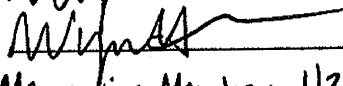
**On an Attached Sheet Please Address the Following:**

- 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.

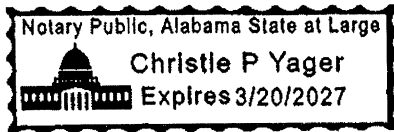
Owner(s): 

Operator(s): 

Title/Date: Managing Member 1/28/25

SWORN to and subscribed before me, this 28<sup>th</sup> day of January, 2025.

(Seal)

Christie Pyager  
Notary PublicMy Commission Expires: 3/20/2027**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.

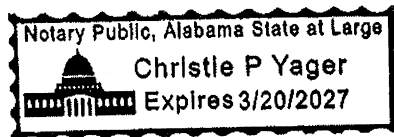
Purchaser(s):

Operator(s):

Title/Date:

Managing Member, 7/28/25SWORN to and subscribed before me, this 28<sup>th</sup> day of January, 2025.

(Seal)

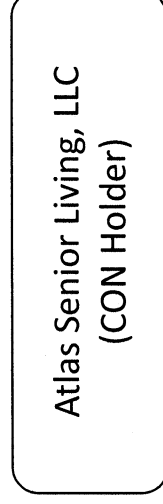
Christie Pyager  
Notary PublicMy Commission Expires: 3/20/2027

Author: Alva M. Lambert

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

History: New Rule

## **Current Structure Prior to CHOW**



## **Proposed Structure After CHOW**

