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CO2025-055
RECEIVED
Sep 10 2025
STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

September 10, 2025

Joshua McCann
(816) 360-4289
jmccann@polsinelli.com

VIA FEDEX

VIA EMAIL (shpda.online@shpda.alabama.gov)

State Health Planning and Development Agency
100 North Union Street, Suite 870
Montgomery, Alabama 36104

**Re: Indirect Change of Ownership Resulting in Change in Direct
Ownership or Control for Hospice Agencies**

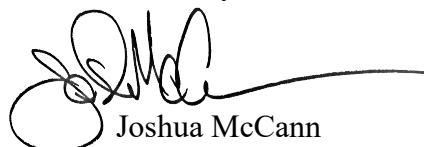
Dear Ms. Norman:

Based on our prior conversation, this letter contains additional information and a description of the transaction which occurred.

We previously notified you of the merger between United Health Group, Inc. (“UnitedHealth”) and Amedisys, Inc. (“Amedisys”). On June 26, 2023, Amedisys signed an Agreement and Plan of Merger with UnitedHealth. The total value of the transaction was \$3.3 billion. On August 14, 2025 (the “Closing Date”), Aurora Holdings Merger Sub Inc. (“Merger Sub”), a UnitedHealth subsidiary created for the purpose of the transaction, merged with and into Amedisys (the “Merger”). The separate corporate existence of Merger Sub ceased, and Amedisys continues as the surviving corporation in the Merger as a wholly-owned subsidiary of UnitedHealth. The result of the Merger is that Amedisys (and by extension the intermediary organizations and hospice agencies) is wholly owned by UnitedHealth. Hospice agencies involved in this transaction are listed in the enclosed Appendix A. Please see the enclosed Organizational Chart which depicts the transaction.

Thank you for your time and attention to this matter. Should you have any questions, please feel free to contact me at 816-360-4289 or jmccann@polsinelli.com.

Sincerely,



Joshua McCann

Atlanta | Boston | Chicago | Dallas | Denver | Fort Lauderdale | Fort Worth | Houston
Kansas City | Los Angeles | Miami | Nashville | New York | Park City | Philadelphia | Phoenix | Raleigh
Salt Lake City | San Diego | San Francisco | Seattle | St. Louis | Washington, D.C. | Wilmington

polsinelli.com

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: 093-P2428
(This can be found at www.shpda.alabama.gov, Health Care Data, ID Codes)

Name of Facility/Provider: Amedisys Hospice of Hamilton
(ADPH Licensure Name)

Physical Address: 123 1st Avenue Southwest
Hamilton, AL 35570

County of Location: MARION

Number of Beds/ESRD Stations: 0

CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages if necessary. Bibb, Fayette, Franklin, Lamar, Marion, Pickens, Tuscaloosa, Walker, Winston

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: AseraCare Hospice - Hamilton, LLC

Mailing Address: 3854 American Way, Suite A
Baton Rouge, LA 70816

Operator (Entity Name): AseraCare Hospice - Hamilton, LLC

Part III: Acquiring Entity Information

Name of Entity: AseraCare Hospice - Hamilton, LLC

Mailing Address: 3854 American Way, Suite A
Baton Rouge, LA 70816

Operator (Entity Name): AseraCare Hospice - Hamilton, LLC

Proposed Date of Transaction is on or after: 08/14/2025

Part IV: Terms of Purchase

Monetary Value of Purchase: \$ 1.00

Type of Beds: _____

Number of Beds/ESRD Stations: 0

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

Projected Equipment Cost: \$ _____

Projected Construction Cost: \$ _____

Projected Yearly Operating Cost: \$ _____

Projected Total Cost: \$ 0.00

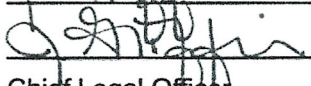
On an Attached Sheet Please Address the Following:

- 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.

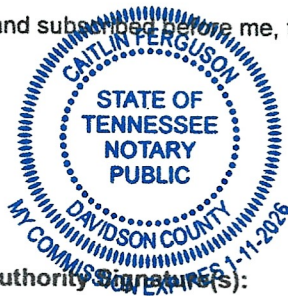
Owner(s):  _____

Operator(s):  _____

Title/Date: Chief Legal Officer 9/9/2025

SWORN to and subscribed before me, this 5 day of September, 2025

(Seal)



Notary Public

My Commission Expires: 1/11/2026

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):

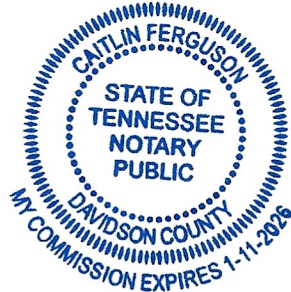
Operator(s):

Title/Date:

Chief Legal Officer

9/5/2025SWORN to and subscribed before me, this 5 day of September, 2025

(Seal)



Notary Public

My Commission Expires: 1/11/2026

Author: Alva M. Lambert

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

History: New Rule

Notice of Change of Ownership/Control – Attachment

Additional Questions

- 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).**
 - a. The proposal does not involve any changes to any services offered.
- 2. Whether the proposal will include the addition of any new beds.**
 - a. The proposal does not include the addition of any new beds.
- 3. Whether the proposal will involve the conversion of beds.**
 - a. The proposal does not involve the conversion of any beds.
- 4. Whether the assets and stock (if any) will be acquired.**
 - a. The assets of the current provider will be acquired.

Appendix A

Facilities impacted by United Health Group – Acquisition of Amedisys, Inc. (Transaction occurred on August 14, 2025) – Indirect Equity Change

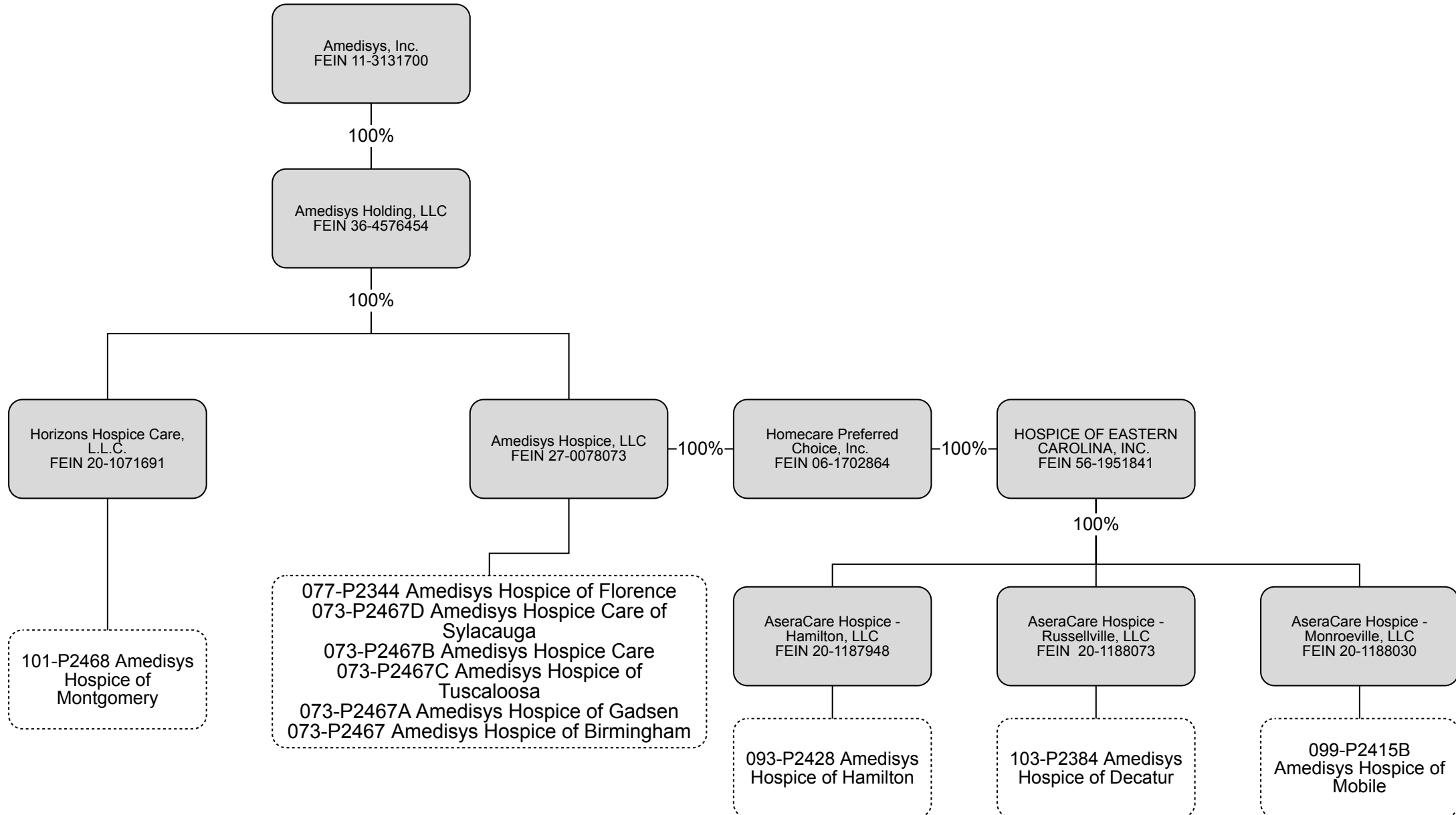
File No. 1	Facility ID No.	Parent / Branch ²	License Numbers	Legal Entity Name	DBA Name	Address
1.	099-P2415B	Parent	E4907	AseraCare Hospice - Monroeville, LLC	Amedisys Hospice of Mobile	11 North Water Street, Suite 11225 Mobile, AL 36602
2.	103-P2384	Parent	E5203	AseraCare Hospice - Russellville, LLC	Amedisys Hospice of Decatur	725 Beltline Rd, SW, Suite D Decatur, AL 35601
3.	093-P2428	Parent	E4702	AseraCare Hospice - Hamilton, LLC	Amedisys Hospice of Hamilton	123 1st Avenue Southwest Hamilton, AL 35570
4.	073-P2467	Parent	E3708	Amedisys Hospice, L.L.C.	Amedisys Hospice of Birmingham	2204 Lakeshore Drive, Suite 160 Homewood, AL 35209-6762
	073-P2467A	Branch	E2805	Amedisys Hospice, L.L.C.	Amedisys Hospice of Gadsden	115 W. Grand Avenue, Suite 70 Rainbow City, AL 35906
	073-P2467C	Branch	E6307	Amedisys Hospice, L.L.C.	Amedisys Hospice of Tuscaloosa	1300 McFarland Blvd NE, Suite 340 Tuscaloosa, AL 35406-2282
	073-P2467B	Branch	E4513	Amedisys Hospice, L.L.C.	Amedisys Hospice Care	2101 Clinton Ave W., Suite 401 Huntsville, AL 35805-3110
	073-P2467D	Branch	E6111	Amedisys Hospice, L.L.C.	Amedisys Hospice Care of Sylacauga	216 North Norton Avenue Sylacauga, AL 35150
5.	101-P2468	Parent	E5107	Horizons Hospice Care, L.L.C.	Amedisys Hospice of Montgomery	8160 Decker Lane Montgomery, AL 36117
6.	077-P2344	Parent	E3911	Amedisys Hospice, L.L.C.	Amedisys Hospice of Florence	412 South Court Street, Suite 302 Florence, AL 35630

¹ Application file names are numbered for ease of review.

² Branch location is located immediately under respective parent location.

Before

United Health Group, Inc. acquisition of
Amedisys, Inc.
Closing Date: 08/14/2025
List of Parent/Branch Locations



United Health Group, Inc.
FEIN 41-1321939

100%

Amedisys, Inc.
FEIN 11-3131700

100%

Amedisys Holding, LLC
FEIN 36-4576454

100%

Horizons Hospice Care,
L.L.C.
FEIN 20-1071691

101-P2468 Amedisys
Hospice of
Montgomery

Amedisys Hospice, LLC
FEIN 27-0078073

077-P2344 Amedisys Hospice of Florence
073-P2467D Amedisys Hospice Care of
Sylacauga
073-P2467B Amedisys Hospice Care
073-P2467C Amedisys Hospice of
Tuscaloosa
073-P2467A Amedisys Hospice of Gadsen
073-P2467 Amedisys Hospice of Birmingham

100%

Homecare Preferred
Choice, Inc.
FEIN 06-1702864

100%

HOSPICE OF EASTERN
CAROLINA, INC.
FEIN 56-1951841

100%

AseraCare Hospice -
Hamilton, LLC
FEIN 20-1187948

093-P2428 Amedisys
Hospice of Hamilton

AseraCare Hospice -
Russellville, LLC
FEIN 20-1188073

103-P2384 Amedisys
Hospice of Decatur

AseraCare Hospice -
Monroeville, LLC
FEIN 20-1188030

099-P2415B
Amedisys Hospice of
Mobile

After

United Health Group, Inc. acquisition of
Amedisys, Inc.

Closing Date: 08/14/2025

List of Parent/Branch Locations