STATE HEALTH PLANNING ANI

Chief Executive Officer 717 37th Street South Birmingham, AL 35222

Tel: (205) 820-7000 Fax: (855) 301-9880

David A. Lester

Email: david.lester@prohealthgroup.con

July 23, 2018

(DELIVERED BY EMAIL TO: data.submit@shpda.alabama.gov)

Mr. Alva M. Lambert **Executive Director** State Health Planning & Development Agency **RSA** Union Building 100 North Union Street Montgomery, AL 36104-3719

> Letter of Non-Reviewability to Merge Two Certificates of Need Re:

Dear Mr. Lambert,

I am writing on behalf of ProHealth Hospice-Gadsden, LLC ("ProHealth") in response to your letter dated July 17, 2018, to supplement ProHealth's request that the State Health Planning and Development Agency ("SHPDA") issue a determination that ProHealth is not required to obtain a new CON to merge CON 2506-HPC and CON RV2011-029.

1. Parent Agency and CON Holder

ProHealth Hospice-Gadsden, LLC will be the holder of the merged Certificate of Need.

2. Costs for the Proposed Project

The only cost associated with this request is the SHPDA filing fee of \$1,000.

3. Disclosure of Financial Interest in Other Healthcare Providers

ProHealth Hospice-Gadsden, LLC does not hold financial interests in any other healthcare providers.

Please let me know if you need any additional information from ProHealth to process this request.

Sincerely,

David A. Lester



David A. Lester Chief Executive Officer 717 37th Street South Birmingham, AL 35222 Tel: (205) 820-7000 Fax: (855) 301-9880

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Affirmation of Request Party

The undersigned, being first duly sworn, hereby make oath or affirm that he is the Chief Executive Officer of ProHealth Hospice-Gadsden, LLC, has knowledge of the facts in this request, and to the best of his information, knowledge, and belief, such facts are true and correct.

Affiant:

Subscribed and sworn to before me this 23 day of July, 2018

Notary Public:

My commission expires:

MARY SIZEMORE MANGINA My Commission Expires August 11, 2021

