

RV2018-10



RECEIVED

Jan 18 2018

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

430 Innovation Drive • Blairsville, PA 15717
(724) 343-4060 • (888) 644-7747 • Fax: (724) 343-4068

January 16, 2018

***Revised to reflect projected total annual operating costs.**

State Health Planning & Development Agency
Attention: Alva Lambert, Executive Director
RSA Union Building
100 N. Union Street, Suite 870
Montgomery, AL 36104

RE: Aldridge Physical Therapy, LLC. - Request for Letter of Non-Reviewability

Dear Mr. Lambert,

Please find information below pertaining to a request determination, pursuant to the Alabama Certificate of Need Program Rules and Regulations §410-1-7-.02, that the proposed establishment by Aldridge Physical Therapy, LLC of a single specialty Rehabilitation Agency operating in the below-listed location in Alabama is not subject to Certificate of Need review. Our request is based upon the location will only be providing a single service of physical therapy. Thank you in advance for your attention to this matter, and please do not hesitate to contact me if additional information is required at (724) 343-4060 x134 or tgiannetta@phoenixrehab.com.

- | | |
|---|--|
| 1. Name of Company Applying: | Aldridge Physical Therapy, LLC |
| 2. Address and Contact Information for Company | Anthony Giannetta, PT, DPT, MS
Chief Compliance Officer
PHOENIX Rehabilitation and Health Services, Inc.
430 Innovation Drive
Blairsville, PA 15717 |
| 3. Service Area Being Requested:
Request for Letter of Non-Reviewability for Physical Therapy Practice | Butler County: Greenville - Open: 04/24/2017
323 Greenville Bypass
Suite C
Greenville, AL 36037-3781
Phone: 334-665-4368
Fax: 334-665-4370 |
| 4. What Services will be Provided by Requester: | Physical Therapy Services |
| 5. Financial Breakdown: | |
| a. Equipment | Using equipment presently located in each office |
| b. First year annual operating costs | Greenville: \$391,383 <u>*Revised to reflect projected total annual operating costs.</u> |
| c. Capital costs | |
| 1) Leases | Greenville: \$2,600.00/month |

CON Request for Reviewability - Greenville

- 2) Land/Building Costs \$0.00
3) Construction Costs \$0.00
6. Financial Interest by any other Health Care Facilities or Groups: 100% direct ownership by of PHOENIX Rehabilitation and Health Services, Inc.
7. Check or Money Order for \$1000.00: Separately sent via USPS

Affirmation of Requesting Party:

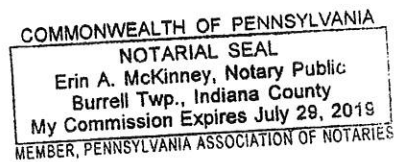
The undersigned, being first duly sworn, hereby make oath or affirm that he is Chief Compliance Officer of PHOENIX Rehabilitation and Health Services, Inc., the parent company of Aldridge Physical Therapy, LLC, that he has knowledge of the facts in this request, and to the best of his information, knowledge and belief, such facts are true and correct.

Affiant *Anthony Giannetta* (SEAL)
Anthony Giannetta, Chief Compliance Officer

SUBSCRIBED AND SWORN to before me this 16th day of January, 2018.

Erin A. McKinney
Notary Public

My commission expires: 7/29/19





STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870

MONTGOMERY, ALABAMA 36104

January 12, 2018

Mr. Anthony Giannetta
Chief Compliance Officer
Phoenix Rehabilitation and Health Services, Inc.
430 Innovation Drive
Blairsville, PA 15717

RE: RV2018-010
Aldridge Physical Therapy, LLC
Butler County

Dear Mr. Giannetta:

This is written in response to your request for letter of non-reviewability filed on January 3, 2018, in which a request was submitted for the establishment of a single specialty Rehabilitation Agency providing a single service of physical therapy located in Butler County. Aldridge Physical Therapy, LLC purposes to only provide the single service of Physical Therapy at this location.

Pursuant to Rule 410-1-4-.01 (b) of the *Alabama Certificate of Need Program Rules and Regulations* it is determined additional information is needed by the Agency before a determination can be made if the annual operating costs exceed the current threshold amount of \$1,192,607. The financial breakdown provided to the Agency listed an October 2017 year to date amount, not the projected total annual operating costs.

Pursuant to ALA. ADMIN CODE r. 410-1-3-.09, all documents to be filed must be submitted electronically to shpda.online@shpda.alabama.gov, in text searchable, PDF format.

Should you have any questions, please contact Carter Sims at (334) 242-4040.

Sincerely,

Alva M. Lambert
Executive Director

AML/wcs

RV 2018-010



RECEIVED

Jan 03 2018

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

430 Innovation Drive • Blairsville, PA 15717
(724) 343-4060 • (888) 644-7747 • Fax: (724) 343-4068

State Health Planning & Development Agency
Attention: Alva Lambert, Executive Director
RSA Union Building
100 N. Union Street, Suite 870
Montgomery, AL 36104

RE: Aldridge Physical Therapy, LLC. - Request for Letter of Non-Reviewability

Dear Mr. Lambert,

Please find information below pertaining to a request determination, pursuant to the Alabama Certificate of Need Program Rules and Regulations §410-1-7-.02, that the proposed establishment by Aldridge Physical Therapy, LLC of a single specialty Rehabilitation Agency operating in the below-listed location in Alabama is not subject to Certificate of Need review. Our request is based upon the location will only be providing a single service of physical therapy. Thank you in advance for your attention to this matter, and please do not hesitate to contact me if additional information is required at (724) 343-4060 x134 or tgiannetta@phoenixrehab.com.

- | | |
|---|--|
| 1. Name of Company Applying: | Aldridge Physical Therapy, LLC |
| 2. Address and Contact Information for Company | Anthony Giannetta, PT, DPT, MS
Chief Compliance Officer
PHOENIX Rehabilitation and Health Services, Inc.
430 Innovation Drive
Blairsville, PA 15717 |
| 3. Service Area Being Requested:
Request for Letter of Non-Reviewability for Physical Therapy Practice | Butler County: Greenville - Open: 04/24/2017
323 Greenville Bypass
Suite C
Greenville, AL 36037-3781
Phone: 334-665-4368
Fax: 334-665-4370 |
| 4. What Services will be Provided by Requester: | Physical Therapy Services |
| 5. Financial Breakdown: | |
| a. Equipment | Using equipment presently located in each office |
| b. First year annual operating costs | Greenville: YTD 10/17 \$195,691.25 |
| c. Capital costs | |
| 1) Leases | Greenville: \$2,600.00/month |
| 2) Land/Building Costs | \$0.00 |
| 3) Construction Costs | \$0.00 |
| 6. Financial Interest by any other Health Care Facilities or Groups: | 100% direct ownership by of PHOENIX Rehabilitation and Health Services, Inc. |
| 7. Check or Money Order for \$1000.00: | Separately sent via USPS |

CON Request for Reviewability - Greenville

Affirmation of Requesting Party:

The undersigned, being first duly sworn, hereby make oath or affirm that he is Chief Compliance Officer of PHOENIX Rehabilitation and Health Services, Inc., the parent company of Aldridge Physical Therapy, LLC, that he 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 *Anthony Giannetta* (SEAL)
Anthony Giannetta, Chief Compliance Officer

SUBSCRIBED AND SWORN to before me this 28th day of December.

Erin A. McKinney
Notary Public

My commission expires: 7/29/19

