



HOME HEALTH • HOSPICE • FACILITY-BASED SERVICES • COMMUNITY-BASED SERVICES

RV2019-009

RECEIVED

Nov 29, 2018

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

November 26, 2018

Alabama State Health Planning & Development Agency
ATTENTION: Alva M. Lambert, Executive Director
100 North Union Street, Suite 870
Montgomery, Alabama 36104

VIA FEDERAL EXPRESS &
VIA ELECTRONIC MAIL

RE: Camden HomeCare, LLC d/b/a Alabama HomeCare
NPI #1659604924 Tax ID #27-0944633 Medicare #01-7086 Facility ID # 131-H7086
RELOCATION OF HOME HEALTH AGENCY (effective 12/27/2018)
REVIEWABILITY DETERMINATION REQUEST

Dear Mr. Lambert:

Pursuant to SHPDA Rule 410-1-7-02, I am writing to request your determination that the relocation of the administrative offices of the home health agency referenced above to another site also within Wilcox County, Alabama is not subject to Certificate of Need review.

Effective December 27, 2018 the provider referenced above intends to relocate its administrative offices to 15 Claiborne Street, Suite C, Camden, Alabama 36726-1709.

Alabama Health Care Group, LLC (an Alabama limited liability company and wholly-owned subsidiary of LHC Group, Inc.) owns 100% direct membership interest in the provider.

The relocation of the agency's administrative office will not include the addition or conversion of any beds, will not involve the acquisition of stock and the services to be offered from the new location will be the same as the services offered from the current location. The approximate distance between the two sites is less than two miles.

The capital expenditure for the relocation project is expected to be less than \$25,000.00. In addition, there will be no changes in the staff, management and service area of the home health agency as a result of this relocation.

Please find enclosed a check in the amount of \$1,000.00 made payable to the Alabama State Health Planning and Development Agency for this reviewability determination. Please also return a date-stamped copy of this correspondence to me at Post Office Box 51266, Lafayette, Louisiana 70505-1266.

Should you have any questions or require additional assistance, please contact Jodi Bordelon, Licensure & Regulatory Paralegal, at (337) 233-1307, Ext. 210760 or via e-mail at jodi.bordelon@lhcgroupp.com.

Sincerely,

Donald D. Stelly, President
LHC Group, Inc.

Enclosure

901 Hugh Wallis Road South • Lafayette, Louisiana 70508
Toll free: 1.866.LHC.GROUP • Phone: 337.233.1307
LHCgroup.com

It's all about helping people.

AFFIRMATION

I, Donald D. Stelly, President of LHC Group, Inc., being first duly sworn, hereby affirms that the information and facts contained in the letter of November 26, 2018 requesting a ruling on reviewability are, to the best of my knowledge and belief, a true, correct and accurate representation of the facts.

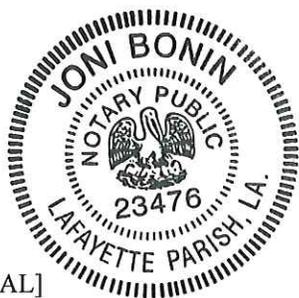


Donald D. Stelly

State of Louisiana

Parish of Lafayette

The foregoing instrument was sworn to and subscribed before me this 26th day of November, 2018, by Donald D. Stelly, President of LHC Group, Inc.



[NOTARIAL SEAL]



Joni Bonin, Notary Public
Notary ID # 23476
My Commission Expires: At Death

AL STATE HEALTH PLANNING

1002680

INVOICE DATE	INVOICE NUMBER	PO NUMBER	DESCRIPTION	GROSS AMOUNT	DISC AMOUNT	NET AMOUNT
11/21/18	1659604924 12272018			\$1,000.00	\$0.00	\$1,000.00
				TOTAL PAID	\$1,000.00	\$0.00
						\$1,000.00

Detach at Perforation Before Depositing Check

*Camden HomeCare, LLC d/b/a Alabama HomeCare
 Facility ID # 131-47086
 Reviewability Determination Request re Relocation (APP 12/27/2018)*

LHC Group Inc
 901 Hugh Wallis Rd S
 Lafayette, LA 70508

Capital One, N.A.
 New Orleans, LA

CHECK DATE	CHECK NUMBER
11/21/2018	762039

14-9
 650

Amount
\$ *****1,000.00

PAY *One Thousand and 00/100 Dollars*

PAY TO THE ORDER OF
 AL STATE HEALTH PLANNING
 ATTN: ALVA LAMBERT
 100 N UNION STREET SUITE 870
 MONTGOMERY AL 36104
 United States

[Signature]
 Authorized Signature

[Signature]
 Authorized Signature