

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

Email: david.lester@prohealthgroup.con

May 2, 2022

RV2022-023

RECEIVED

May 02 2022

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

(DELIVERED BY EMAIL TO shpda.online@shpda.alabama.gov)

Ms. Emily Marsal, Executive Director State Health Planning and Development Agency 100 North Union Street, Suite 870 Montgomery, AL 36104

Re: Relocation of ProHealth Hospice's Birmingham Office

Dear Ms. Marsal,

I am writing on behalf of ProHealth Hospice-Gadsden, LLC (the "<u>Agency</u>") in accordance with Rule 410-1-7-.02 to notify the State Health Planning and Development Agency ("<u>SHPDA</u>") that the Agency will be relocating its administrative office from Jefferson County to Shelby County and respectfully request a determination that such relocation is not subject to Certificate of Need Review.¹

Effective May 16, 2022, the Agency will relocate to 1800 Corporate Drive, Birmingham, AL 35242. The distance between the Agency's current office and new office is 11.7 miles. 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 capital expenditure for the relocation of the administrative office is expected to be less than \$15,000. In addition, there will be no changes in the staff, management, or service area of the Agency as a result of this relocation.

We will submit the filing fee electronically contemporaneously with the filing of this request.

If you have any questions or need any additional information from us, please do not hesitate to let me know.

Sincerely,

David A. Lester

¹ The Agency previously obtained a Reviewability Determination authorizing it to establish a branch office in Shelby County. <u>See</u> RV2022-07, a true and correct copy of which is enclosed herewith.



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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:

(Seal)

Subscribed and sworn to before me this 2nd day of May, 2022

Notary Public:

My commission expires:

My Commission Expires
May 24, 2023

MELANIE PHILLIPS Notary Public Alabama State at Large



STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870 MONTGOMERY, ALABAMA 36104

December 23, 2021

Mr. David A. Lester, CEO ProHealth Home Health 717 37th Street South Birmingham, Alabama 35222

RE:

RV2022-007

ProHealth Hospice-Gadsden, LLC

SHPDA ID: 055-P2811

Dear Mr. Lester:

This letter is written in response to the above referenced Request for a Reviewability Determination received on October 20, 2021, on behalf of ProHealth Hospice-Gadsden, LLC, to establish a branch office in Shelby County, Alabama. The proposed branch office will operate under the Agency's Medicare Provider number 01-1686.

Agency records reflect Certificate of Need (CON) 2506-HPC was issued November 4, 2010, for Gadsden Home Care Services, LLC, d/b/a Gadsden Regional Hospice, to provide in-home hospice services in Blount, Calhoun, Cherokee, DeKalb, Etowah, Marshall, and Saint Clair counties. CO2016-047 was issued effective June 7, 2016, whereby the CON authorization on behalf of this provider was transferred to ProHealth Hospice-Gadsden, LLC.

On June 21, 2018, ProHealth Hospice-Gadsden, LLC filed a Request for a Reviewability Determination (RV2018-021) pertaining to the consolidation of CON authorities, which included CON 2370-HPC, CON 2409-HPC, CON 2410-HPC, and CON 2506-HPC, resulting in ProHealth Hospice-Gadsden, LLC as a parent provider and ProHealth Hospice-Central Alabama as a satellite provider. On September 27, 2018, this Agency sent a letter confirming the consolidation of the CON authorities held by ProHealth Hospice-Gadsden and ProHealth Hospice-Central Alabama, noting the realignment of the referenced providers as a parent and a branch location operating under a single provider number. A revised CON 2506-HPC was issued to ProHealth Hospice-Gadsden, LLC, d/b/a ProHealth Hospice, with the realignment resulting in the CON authorized service area of Bibb, Blount, Calhoun, Cherokee, Chilton, Coosa, DeKalb, Etowah, Jefferson, Marshall, Saint Clair, Shelby, Tuscaloosa, and Walker counties.

RE: RV2022-007 December 23, 2020 Page Two

The request states the proposed hospice branch office does not involve construction, development, acquisition, or other establishment of a new health care facility and pursuant to Rule 410-1-4-.01, will not exceed any of the Certificate of Need expenditure thresholds in effect at the time of this filing, which were \$3,165,569.00 for major medical equipment, \$1,266,226.00 for new annual operating costs, and \$6,331,138.00 for capital expenditures. The proposed request does not involve the addition, relocation or conversion of beds, or the acquisition of major medical equipment or the offering of a new health care service, as ProHealth Hospice-Gadsden, LLC currently provides in-home hospice services to patients in Shelby County, Alabama. In addition, there will be no changes in the service areas of the referenced provider as a result of the new hospice branch office.

According to the facts that have been provided, a Certificate of Need would not be required pursuant to ALA. ADMIN. CODE r. 410-1-4-.02 (2017) of the *Alabama Certificate of Need Program Rules and Regulations* for the proposed hospice branch office. Pursuant to ALA. ADMIN. CODE r. 410-1-7-.02 (2017), this opinion is for informational purposes only and is based on circumstances as they currently exist, with a clear understanding that this proposal will not result in the offering of any new institutional health services.

This letter is also specifically conditioned upon the continuing accuracy of the representations contained in this request and the assumption that all pertinent information relative to this request has been disclosed. Should there be any deviations from the facts and premises which you provided to this Agency, and should circumstances prove to be other than represented, this letter may become null and void.

Should you have any questions, please contact the Agency at (334) 242-4103.

Sincerely,

Emily T. Marsal Executive Director

ETM:mst

cc: Felicia Williams-Smith, ADPH Rosemary Coggins, ADPH Gloria Harris, ADPH