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**STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY
January 6, 2016**

**Alabama State Health Planning and Developing
Agency Attn: Alva M. Lambert, Executive
Director
100 North Union Street, Suite 870
Montgomery, AL 36104**

RE: Request for Reviewability Determination

From: Creative Hospice Holding, LLC

Homestead Hospice of Cahaba, LLC

SHPDA ID No.: 047-P2434

License No: E-2401

Medicare No.: 01-1549

Homestead Hospice of Southwest Alabama, LLC

SHPDA ID: 023-P2420

License #: E1205

Medicare #: 01-1672

Dear Mr. Lambert,

Please accept this letter as formal request for reviewability determination to consolidate two parent providers, currently located in **Choctaw and Dallas Counties**, into one surviving parent provider (**Dallas County**) and one satellite provider (**Choctaw County**). Upon approval of this request, we will surrender the CON to **operate the Choctaw County provider**, and combine that service area into the service area authorized under the separate CON currently approved for the Dallas County Provider.

We understand that the merged CON Authority may not be subsequently divided into separate CON's for future disposition.

There will be no additional costs due to the merger of the CON above costs we would have incurred if Homestead Hospice of Southwest remained a parent company.

Enclosed is a check # 1117 in the amount of \$1000.00 for payment of the required fee.

Also enclosed is a second copy of this letter. Please date stamp and return to me in the enclosed self-addressed/stamped envelope.



If you have questions or need additional information, please contact me at 770-825-6550 or via email at jeanne@homesteadhospice.net.

Sincerely,

A handwritten signature in cursive script that reads "Jeanne Pete".

Jeanne Pete
VP Program Development
Homestead Hospice
jeanne@homesteadhospice.net

cc: Ray Sherer, ADPH, Guy Nevins, ADPH, Carter Sims, ADPH