



State of New Jersey
DEPARTMENT OF HEALTH
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Governor

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Lt. Governor

JUDITH M. PERSICHILLI, RN, BSN, MA
Acting Commissioner

October 21, 2019

ELECTRONIC AND FIRST-CLASS MAIL

Gregory D. Smith
CEO & Manager
Maplewood at Princeton, LLC
One Gorham Island
Westport, Connecticut 06880

Re: CN# ER 140303-12-37
Maplewood at Princeton, LLC
Assisted Living Residence
Extension of Time- 24 months
Total Project Cost: \$16,750.00

Dear Mr. Smith:

The New Jersey Department of Health (Department) is approving Maplewood at Princeton, LLC's (Maplewood), application submitted May 1, 2019, pursuant to N.J.A.C. 8:33-5.1(a)6, for a two-year extension of time for the above referenced certificate of need (CN), with an expiration date of June 11, 2019. The original CN granted on July 11, 2014, was for the establishment of a 130-bed assisted living residence at Hospital Drive, Plainsboro, New Jersey in Middlesex County. Please be advised, your CN is now extended for a two-year time period, with new expiration date as noted above. However, if after this period the applicant requires any additional extension, a new CN application will be required to be submitted.

The Department of Community Affairs (DCA) issued an initial Final Release dated April 6, 2016 for the Maplewood Princeton project (DCA Ref # 5252-15). However, DCA amended the building codes to adopt the International Building Code, which resulted in the need for the applicant to submit amended plans in accordance with the International Building Code. The amended plans were not approved by DCA until August 22, 2018. This in turn delayed the applicant from applying for the required permits necessary to begin construction. The applicant has submitted documents necessary for building permits to Plainsboro Township, and all zoning and planning board approvals for the project have been issued.

The decision to approve Maplewood's extension of time application is based on a review of the application and documents submitted, requesting a two-year extension of time to construct and implement the project. This request is due to the time it has taken to obtain required permits and local approval.

The total project cost of \$16,750.00 remains the same. The project will be financed by private equity. Please be advised that this approval is limited to the proposal as presented and reviewed. An additional review by the Department may be necessary if there is any change in scope as defined in N.J.A.C. 8:33-3.9. However, in accordance with N.J.A.C. 8:33-3.9(a)1-3, a change in cost of an approved CN is exempt from CN review but subject to the following:

1. The applicant shall file a signed certification as to the final project cost expended for the project at the time of the application for licensure for the beds/services with the Office of Certificate of Need and Healthcare Facility Licensure.
2. Where the actual total project cost exceeds the certificate of need approved total project cost and is greater than \$1,000,000, the applicant shall remit the additional certificate of need application fee due to the Certificate of Need and Healthcare Facility Licensure Program. The required additional fee shall be 0.25 percent of the total project cost in excess of the certificate of need approved total project cost.
3. The Department will not issue a license for the beds/services until the additional fee is remitted in full.

This approval is not intended to preempt in any way any municipality's authority to regulate land use within its borders and shall not be used by you to represent that the Department has made any findings or determination relative to the use of any specific property. Please be advised that services may not commence until such time as a license has been issued by the Certificate of Need and Healthcare Facility Licensure Program. Any approval granted by this Department relates to certificate of need and/or licensing requirements only and does not imply acceptance by a reimbursing entity. Issues involving reimbursement are solely between the facility and the third-party payer. The Department is neither a party to such matters nor an arbiter of disputes between the parties.

The Department, in approving this application, has relied solely on the facts and information presented to us. The Department offers no opinion as to whether the proposed ownership or business organization is in compliance with the Codey Act, Board of Medical Examiners administrative rules, the federal anti-referral (Stark) and federal anti-kickback laws. We have not undertaken an independent investigation of such information. If material facts have not been disclosed or have been misrepresented, the

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Department may take appropriate administrative regulatory action to rescind the approval or refer the matter to the Office of the Attorney General.

We look forward to working with you and helping you to provide a high quality of care to your residents. If you have any questions concerning this CN or regarding the licensure of the establishment of a 130-bed assisted living residence, please do not hesitate to telephone Ms. Jean DeVitto, Executive Director, Division of Certificate of Need and Licensing at (609) 292-6587.

Sincerely,



Marcela Ospina Maziarz, MPA
Deputy Commissioner
Health Systems

C: Jean M. DeVitto, DOH (Electronic Mail)
Susan Kelley, DOH (Electronic Mail)
Felicia L. Harris, DOH (Electronic Mail)
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Lic. File

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