

CERTIFICATE OF NEED APPLICATION

FOUNTAINBLEAU LODGE – ADD SNF BEDS

On Behalf Of

FOUNTAINBLEAU OF CAPE GIRARDEAU, INC.



Project No. 6218 NS

Add 8 SNF Beds & Additional Construction

Submitted to:

Missouri Health Facilities Review Committee

June 27, 2025

Submitted by:

Richard Hill

Haley Dierks

Attorneys at Law

Lashly & Baer, P.C.

714 Locust Street

St. Louis, MO 63101

Project Name: Fountainbleau Lodge - Add SNF BedsProject No: 6218 NSProject Description: Add 8 SNF Beds & Additional ConstructionDone Page N/ADescription**Divider I. Application Summary:**

- ✓ 3 1. Applicant Identification and Certification (Form MO 580-1861)
- ✓ 4-5 2. Representative Registration (Form MO 580-1869)
- ✓ 11-12 3. Proposed Project budget (Form MO 580-1863) and detail sheet with documentation of costs.
- ✓ 6-10 4. Provide documentation from MO Secretary of State that the proposed owner(s) and operator(s) are registered to do business in MO.
- ✓ 2 5. State if the license of the proposed operator or any affiliate of the proposed operator has been revoked within the previous five (5) years.
- ✓ 6. If the license of the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years, provide the name and address of the facility whose license was revoked.
- ✓ 2 7. State if the Medicare and/or Medicaid certification of any facility owned or operated by the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years.
- ✓ 8. If the Medicare and/or Medicaid certification of any facility owned or operated by the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years, provide the name and address of the facility whose Medicare and/or Medicaid certification was revoked.

Divider II. Proposal Description:

- ✓ 14 1. Provide a complete detailed project description.
- ✓ 14 2. Provide a timeline of events for the project, from CON issuance through project completion.
- ✓ 17 3. Provide a legible city or county map showing the exact location of the proposed facility.
- ✓ 18 4. Provide a site plan for the proposed project.
- ✓ 19 5. Provide preliminary schematic drawings for the proposed project.
- ✓ 20-22 6. Provide evidence that architectural plans have been submitted to the Department of Health and Senior Services.
- ✓ 14-15 7. Provide the proposed square footage.
- ✓ 23-24 8. Document ownership of the project site, or provide an option to purchase.
- ✓ 15 9. Define the community to be served.
- ✓ 15 10. Provide projected year population for the 15-mile radius service area.
- ✓ 15 11. Identify specific community problems or unmet needs the proposal would address.
- ✓ 15 12. Provide historical utilization for each of the past three (3) **FULL** years and utilization projections through the first three (3) **FULL** years of operation of the new LTC beds.
- ✓ 15 13. Provide the methods and assumptions used to project utilization.
- ✓ 15, 25-26 14. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.
- ✓ 15 15. Provide copies of any petitions, letters of support or opposition received.
- ✓ 25-26 16. Document that providers of similar health services in the proposed 15-mile radius have been notified of the application by a public notice in the local newspaper.
- ✓ 27-36 17. Document that providers of all affected facilities in the proposed 15-mile radius were addressed letters regarding the application.

Divider III. Service Specific Criteria and Standards:

- ✓ 38-42 1. For ICF/SNF beds, address the population-based bed need methodology of fifty-three (53) beds per one thousand (1,000) population age sixty-five (65) and older.
- ✓ 2. For RCF/ALF beds, address the population-based bed need methodology of twenty-five (25) beds per one thousand (1,000) population age sixty-five (65) and older.
- ✓ 3. For LTCH beds, address the population-based bed need methodology of one-tenth (0.1) bed per one thousand (1,000) population.
- ✓ 4. Document any alternate need methodology used to determine the need for additional beds such as Alzheimer's, mental health or other specialty beds.
- ✓ 5. For any proposed facility which is designed and operated exclusively for persons with acquired human immunodeficiency syndrome (AIDS) provide information to justify the need for the type of beds being proposed.
- ✓ 6. If the project is to add beds to an existing facility, has the facility received a Notice of Noncompliance within the last 18 months as a result of a survey, inspection or complaint investigation? If the answer is yes, explain.

Divider IV. Financial Feasibility Review Criteria and Standards:

- ✓ 44 1. Document that the proposed costs per square foot are reasonable when compared to the latest "RS Means Construction Cost data"
- ✓ 45 2. Document that sufficient financing is available by providing a letter from a financial institution or an auditor's statement indicating that sufficient funds are available.
- ✓ 45, 46-47 3. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) for the latest three (3) years, and projected through three (3) **FULL** years beyond project completion.
- ✓ 45 4. Document how patient charges are derived.
- ✓ 45 5. Document responsiveness to the needs of the medically indigent.
- ✓ 6. For a proposed new skilled nursing or intermediate care facility, what percentage of your admissions would be Medicaid eligible on the first day of admission or become Medicaid eligible within 90 days of admission?
- ✓ 45 7. For an existing skilled nursing or intermediate care facility, what percentage of your admissions are Medicaid eligible on the first day of admission or becomes Medicaid eligible within 90 days of admission.

DIVIDER I

APPLICATION SUMMARY

DIVIDER I. APPLICATION SUMMARY

1. Application Identification and Certification (Form MO 580-1861).

See attached.

2. Representative Registration (Form 580-1869).

See attached.

3. Proposed Project budget (Form MO 580-1863) and detail sheet with documentation of costs.

See attached.

4. Provide documentation from MO Secretary of State that the proposed owner(s) and operator(s) are registered to do business in MO.

See attached.

5. State if the license of the proposed operator or any affiliate of the proposed operator has been revoked within the previous five (5) years

Neither the operator nor any affiliate of the operator has had their license revoked within the previous five (5) years.

6. If the license of the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years, provide the name and address of the facility whose license was revoked.

Not applicable.

7. State if the Medicare and/or Medicaid certification of any facility owned or operated by the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years.

No facility owned or operated by the operator or any affiliate of the operator has had its Medicare and/or Medicaid certification revoked within the previous 5 years.

8. If the Medicare and/or Medicaid certification of any facility owned or operated by the proposed operator or any affiliate of the proposed operator has been revoked within the previous 5 years, provide the name and address of the facility whose Medicare and/or Medicaid certification was revoked.

Not applicable.



Certificate of Need Program

APPLICANT IDENTIFICATION AND CERTIFICATION

The information provided must match the **Letter of Intent** for this project, without exception.

1. Project Location (Attach additional pages as necessary to identify multiple project sites.)

Title of Proposed Project Fountainbleau Lodge - Add SNF Beds	Project Number 6218 NS
Project Address <small>(Street/ City/ State/ Zip Code)</small> 2001 North Kingshighway, Cape Girardeau, MO 63701	County Cape Girardeau

2. Applicant Identification (Information must agree with previously submitted Letter of Intent.)

List All Owner(s): <small>(List corporate entity.)</small>	Address (Street/ City/ State/ Zip Code)	Telephone Number
Fountainbleau of Cape Girardeau, Inc.	2001 North Kingshighway, Cape Girardeau, MO 63701	573-335-1999

List All Operator(s): <small>(List entity to be licensed or certified.)</small>	Address (Street/ City/ State/ Zip Code)	Telephone Number
Fountainbleau of Cape Girardeau, Inc.	2001 North Kingshighway, Cape Girardeau, MO 63701	573-335-1999

3. Ownership (Check applicable category.)

- | | | | |
|--|---|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Individual | <input type="checkbox"/> City | <input type="checkbox"/> District |
| <input type="checkbox"/> Partnership | <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> County | <input type="checkbox"/> Other _____ |

4. Certification

In submitting this project application, the applicant understands that:

- (A) The review will be made as to the community need for the proposed beds or equipment in this application;
- (B) In determining community need, the Missouri Health Facilities Review Committee (Committee) will consider all similar beds or equipment within the service area;
- (C) The issuance of a Certificate of Need (CON) by the Committee depends on conformance with its Rules and CON statute;
- (D) A CON shall be subject to forfeiture for failure to incur an expenditure on any approved project six (6) months after the date of issuance, unless obligated or extended by the Committee for an additional six (6) months;
- (E) Notification will be provided to the CON Program staff if and when the project is abandoned; and
- (F) A CON, if issued, may not be transferred, relocated, or modified except with the consent of the Committee.

We certify the information and date in this application as accurate to the best of our knowledge and belief by our representative's signature below:

5. Authorized Contact Person (Attach a Contact Person Correction Form if different from the Letter of Intent.)

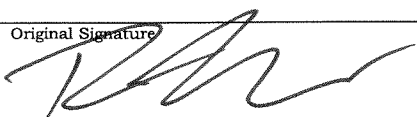
Name of Contact Person Richard Hill	Title Attorney
Telephone Number (314) 621-2939	Fax Number (314) 621-6844
E-mail Address rhill@lashlybaer.com	Date of Signature 6/27/2015



Certificate of Need Program

REPRESENTATIVE REGISTRATION

(A registration form must be completed for **each** project presented.)

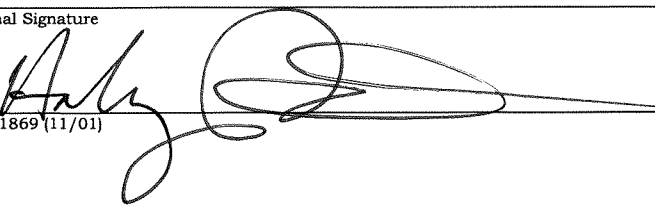
Project Name Fountainbleau Lodge - Add SNF Beds		Number 6218 NS
(Please type or print legibly.)		
Name of Representative Richard Hill		Title Attorney
Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consultant, other) Lashly & Baer, P.C.		Telephone Number (314) 621-2939
Address (Street/City/State/Zip Code) 714 Locust St., Saint Louis, MO 63101		
Who's interests are being represented? (If more than one, submit a separate Representative Registration Form for each.)		
Name of Individual/Agency/Corporation/Organization being Represented Fountainbleau of Cape Girardeau, Inc.		Telephone Number 573-335-1999
Address (Street/City/State/Zip Code) 2001 North Kingshighway, Cape Girardeau, MO 63701		
<div>Check one. Do you: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Neutral</div> <div>Relationship to Project: <input type="checkbox"/> None <input type="checkbox"/> Employee <input checked="" type="checkbox"/> Legal Counsel <input type="checkbox"/> Consultant <input type="checkbox"/> Lobbyist <input type="checkbox"/> Other (explain):</div> <div>Other Information: _____ _____</div> <div>I attest that to the best of my belief and knowledge the testimony and information presented by me is truthful, represents factual information, and is in compliance with §197.326.1 RSMo which says: <i>Any person who is paid either as part of his normal employment or as a lobbyist to support or oppose any project before the health facilities review committee shall register as a lobbyist pursuant to chapter 105 RSMo, and shall also register with the staff of the health facilities review committee for every project in which such person has an interest and indicate whether such person supports or opposes the named project. The registration shall also include the names and addresses of any person, firm, corporation or association that the person registering represents in relation to the named project. Any person violating the provisions of this subsection shall be subject to the penalties specified in § 105.478, RSMo.</i></div>		
Original Signature 		Date 6/27/08



Certificate of Need Program

REPRESENTATIVE REGISTRATION

(A registration form must be completed for **each** project presented.)

Project Name Fountainbleau Lodge - Add SNF Beds		Number 6218 NS
(Please type or print legibly.)		
Name of Representative Haley Dierks		Title Attorney
Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consultant, other) Lashly & Baer, P.C.		Telephone Number (314) 621-2939
Address (Street/City/State/Zip Code) 714 Locust St., Saint Louis, MO 63101		
Who's interests are being represented? (If more than one, submit a separate Representative Registration Form for each.)		
Name of Individual/Agency/Corporation/Organization being Represented Fountainbleau of Cape Girardeau, Inc.		Telephone Number 573-335-1999
Address (Street/City/State/Zip Code) 2001 North Kingshighway, Cape Girardeau, MO 63701		
<p>Check one. Do you:</p> <p><input checked="" type="checkbox"/> Support</p> <p><input type="checkbox"/> Oppose</p> <p><input type="checkbox"/> Neutral</p> <p>Other Information:</p> <p>_____</p> <p>_____</p>		<p>Relationship to Project:</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Employee</p> <p><input checked="" type="checkbox"/> Legal Counsel</p> <p><input type="checkbox"/> Consultant</p> <p><input type="checkbox"/> Lobbyist</p> <p><input type="checkbox"/> Other (explain):</p> <p>_____</p> <p>_____</p>
<p>I attest that to the best of my belief and knowledge the testimony and information presented by me is truthful, represents factual information, and is in compliance with §197.326.1 RSMo which says: <i>Any person who is paid either as part of his normal employment or as a lobbyist to support or oppose any project before the health facilities review committee shall register as a lobbyist pursuant to chapter 105 RSMo, and shall also register with the staff of the health facilities review committee for every project in which such person has an interest and indicate whether such person supports or opposes the named project. The registration shall also include the names and addresses of any person, firm, corporation or association that the person registering represents in relation to the named project. Any person violating the provisions of this subsection shall be subject to the penalties specified in § 105.478, RSMo.</i></p>		
Original Signature 		Date 6/27/2025

MO 580-1869 (11/01)



State of Missouri . . . Office of Secretary of State
ROY D. BLUNT, Secretary of State

Articles of Incorporation

(To be submitted in duplicate by an attorney or an incorporator.)

HONORABLE ROY D. BLUNT
SECRETARY OF STATE
STATE OF MISSOURI
P.O. BOX 778
JEFFERSON CITY, MO 65102

The undersigned natural person(s) of the age of eighteen years or more for the purpose of forming a corporation under The General and Business Corporation Law of Missouri adopt the following Articles of Incorporation:

ARTICLE ONE

The name of the corporation is: Fountainbleau of Cape Girardeau, Inc.

ARTICLE TWO

The address, including street and number, if any, of the corporation's initial registered office in this state is: _____

66 Doctors' Park, Cape Girardeau, MO. 63701

and the name of its initial agent at such address is: Mohammad Shakil

ARTICLE THREE

The aggregate number, class and par value, if any, of shares which the corporation shall have authority to issue shall be:

Thirty thousand (30,000) shares of common stock with a par value of one dollar (\$1.00) per share.

The preferences, qualifications, limitations, restrictions, and the special or relative rights, including convertible rights, if any, in respect of the shares of each class are as follows:

The common stock of this corporation may not be sold or transferred except in accord with the written agreement of Norma Hampton and Mohammad Shakil, and which agreement provides that stockholders shall have the right of first refusal before any transfer of the shares can validly occur, and further, provisions are made for the purchase of the stock by the surviving stockholders upon the death of a stockholder. Said agreement is a part of the by-laws of the corporation.

**FILED AND CERTIFICATE OF
INCORPORATION ISSUED**
NOV 25 1985

ARTICLE FOUR

The extent, if any, to which the preemptive right of a shareholder to acquire additional shares is limited or denied.

None

ARTICLE FIVE

The name and place of residence of each incorporator is as follows:

<i>Name</i>	<i>Street</i>	<i>City</i>
Mohammad Shakil	1326 Kenwood	Cape Girardeau, MO 63701
Norma Louise Hampton	112 North Madison	Malden, MO 63863

ARTICLE SIX

(Designate which and complete the applicable paragraph.)

☒ The number of directors to constitute the first board of directors is two (2). Thereafter the number of directors shall be fixed by, or in the manner provided in the bylaws. Any changes in the number will be reported to the Secretary of State within thirty calendar days of such change.

OR

☐ The number of directors to constitute the board of directors is _____. (The number of directors to constitute the board of directors must be stated herein if there are to be less than three directors. The persons to constitute the first board of directors may, but need not, be named.)

ARTICLE SEVEN


The duration of the corporation is perpetual.

ARTICLE EIGHT

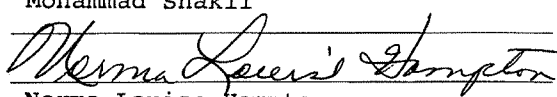
The corporation is formed for the following purposes:

To construct, develop, own, operate, buy, sell, lease and rent facilities and real estate for the housing, care and maintenance of persons requiring or desiring custodial and nursing care and to provide such care and related services.

IN WITNESS WHEREOF, these Articles of Incorporation have been signed this 21st day
of November, 19 85.



Mohammad Shakil



Norma Louise Hampton

State of MISSOURI }
County of CAPE GIRARDEAU } ss

I, Marlene J. Roth, a Notary Public, do hereby certify that
on this 22nd day of November, 19 85, personally appeared before me,
Mohammad Shakil (and Norma Louise Hampton)
who being by me first duly sworn, (severally) declared that ~~he is~~ (they are) the person(s) who signed the foregoing
document as incorporator(s), and that the statements therein contained are true.

NOTARIAL SEAL

Marlene J. Roth
State of Missouri Notary Public Marlene J. Roth
County of Perry
My commission expires 6-24-89

FILED AND CERTIFICATE OF
INCORPORATION ISSUED

NOV 25 1985

Ray D. Blum



STATE OF MISSOURI

ROY D. BLUNT, Secretary of State

CORPORATION DIVISION

Certificate of Incorporation

WHEREAS, duplicate originals of Articles of Incorporation of _____

FOUNTAINBLEAU OF CAPE GIRARDEAU, INC.

have been received and filed in the office of the Secretary of State, which Articles, in all respects, comply with the requirements of The General and Business Corporation Law:

NOW, THEREFORE, I, ROY D. BLUNT, Secretary of State of the State of Missouri, by virtue of the authority vested in me by law, do hereby certify and declare _____

FOUNTAINBLEAU OF CAPE GIRARDEAU, INC.

a body corporate, duly organized this day and that it is entitled to all rights and privileges granted corporations organized under The General and Business Corporation Law; that the address of its initial Registered Office in Missouri is _____

66 DOCTORS' PARK, CAPE GIRARDEAU, MO 63701

that its period of existence is **PERPETUAL**; and that the amount of its Authorized Shares is _____

30,000 COMMON @ \$1.00 PAR

IN TESTIMONY WHEREOF, I hereunto set my hand and affix the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this **25TH** day of **NOVEMBER**, 19 **85**.

Roy D. Blunt
Secretary of State

RECEIVED OF: **FOUNTAINBLEAU OF CAPE GIRARDEAU, INC.****FIFTY THREE AND NO/100** Dollars, \$ **53.00**

For Credit of General Revenue Fund, on Account of Incorporation Tax and Fee.



Certificate of Need Program

PROPOSED PROJECT BUDGET

Description

Dollars

COSTS:*

(Fill in every line, even if the amount is "\$0".)

1. New Construction Costs ***	\$435,760
2. Renovation Costs ***	\$0
3. Subtotal Construction Costs (#1 plus #2)	\$435,760
4. Architectural/Engineering Fees	\$35,000
5. Other Equipment (not in construction contract)	\$48,000
6. Major Medical Equipment	\$0
7. Land Acquisition Costs ***	\$0
8. Consultants' Fees/Legal Fees ***	\$10,000
9. Interest During Construction (net of interest earned) ***	\$13,800
10. Other Costs ***	0
11. Subtotal Non-Construction Costs (sum of #4 through #10)	\$106,800
12. Total Project Development Costs (#3 plus #11)	\$542,560 **

FINANCING:

13. Unrestricted Funds	0
14. Bonds	0
15. Loans	\$542,560
16. Other Methods (specify)	0
17. Total Project Financing (sum of #13 through #16)	\$542,560 **

18. New Construction Total Square Footage	2,074
19. New Construction Costs Per Square Foot *****	\$210.11
20. Renovated Space Total Square Footage	0
21. Renovated Space Costs Per Square Foot *****	\$0

* Attach additional page(s) detailing how each line item was determined, including all methods and assumptions used. Provide documentation of all major costs.

** These amounts should be the same.

*** Capitalizable items to be recognized as capital expenditures after project completion.

**** Include as Other Costs the following: other costs of financing; the value of existing lands, buildings and equipment not previously used for health care services, such as a renovated house converted to residential care, determined by original cost, fair market value, or appraised value; or the fair market value of any leased equipment or building, or the cost of beds to be purchased.

***** Divide new construction costs by total new construction square footage.

***** Divide renovation costs by total renovation square footage.

Fountainbleau Lodge
Add 8 SNF Beds & Additional Construction
Budget Detail

	A	B	C
	Budget Item	Cost	CON Costs Category
1	Construction	\$ 435,760.00	New Construction
2	Architectural and Engineering	\$ 35,000.00	Architectural and Engineering
3	Equipment	\$ 48,000.00	Other Equipment
4	Consultant's Fees	\$ 10,000.00	Consultant / Legal
5	Interest	\$ 13,800.00	Interest During Construction
6	TOTAL	\$ 542,560.00	

All amounts are estimates provided by Larry D. Nelson, Architect.

DIVIDER II

PROPOSAL DESCRIPTION

DIVIDER II. PROPOSAL DESCRIPTION

1. Provide a complete detailed project description.

Fountainbleau Lodge, located at 2001 North Kingshighway in Cape Girardeau, provides both SNF and ALF services. This proposal aims to further upgrade the facility and enhance operational efficiency. Project 6132 NT was previously approved for a 4,200 square foot addition to the skilled nursing section and a 965 square foot addition to the assisted living section of the facility; however, it did not include any new licensed beds. This Project 6218 NS builds on project 6132 NT by expanding the skilled nursing section addition by approximately 2,000 square feet, bringing the total to approximately 6,200 square feet. Additionally, Project 6218 NS includes adding 8 skilled nursing facility beds.

2. Provide a timeline of events for the project, from CON issuance through project completion.

CON Approval:	September 8, 2025
Commence Construction:	October 2025
Complete Construction:	June 2026
First Resident Move-in:	June 2026

3. Provide a legible city or county map showing the exact location of the proposed facility.

See attached.

4. Provide a site plan for the proposed project.

See attached.

5. Provide preliminary schematic drawings for the proposed project.

See attached.

6. Provide evidence that architectural plans have been submitted to the Department of Health and Senior Services.

See attached.

7. Provide the proposed square footage.

The gross square footage of the addition for Projects 6312 NT and 6218 NS combined is approximately 6,200 square feet. The gross square footage of the rooms in which the additional renovations under this Project 6218 NS will take place is approximately 2,000 square feet.

additional renovations under this Project 6218 NS will take place is approximately 2,000 square feet.

8. Document ownership of the project site or provide an option to purchase.

See attached.

9. Define the community to be served.

The community to be served is 65 and older population of Cape Girardeau and the surrounding area located within a 15-mile radius of the proposed site.

10. Provide projected year population for the 15-mile radius service area.

There will be approximately 19,607 individuals aged 65 or older in the service area surrounding the project, based on the State of Missouri's 2030 population estimates.

11. Identify specific community problems or unmet needs the proposal would address.

The elderly population continues to increase over time and more elderly people will be seeking skilled nursing care in their community.

12. Provide historical utilization for each of the past three (3) FULL years and utilization projections through the first three (3) FULL years of operation of the new LTC beds.

Historical

2022 – 68.0% Occupancy; 8,191 resident days
2023 – 69.0% Occupancy; 8,311 resident days
2024 – 70.2% Occupancy; 8,455 resident days

Projected

2026 – 70.0% Occupancy; 10,476 resident days
2027 – 71.4% Occupancy; 10,685 resident days
2028 – 72.8% Occupancy; 10,985 resident days

13. Provide the methods and assumptions used to project utilization.

The methods and assumptions used to project utilization was based on the Applicant's historical operations in the Cape Girardeau market over the last several years.

14. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.

Please see the attached notification published in the Southeast Missourian on June 3, 2025, and again on June 26, 2025, which invites consumers to submit commentary with respect to this project.

15. Provide copies of any petitions, letters of support or opposition received.

The Applicant will provide letters or petitions as it receives them.

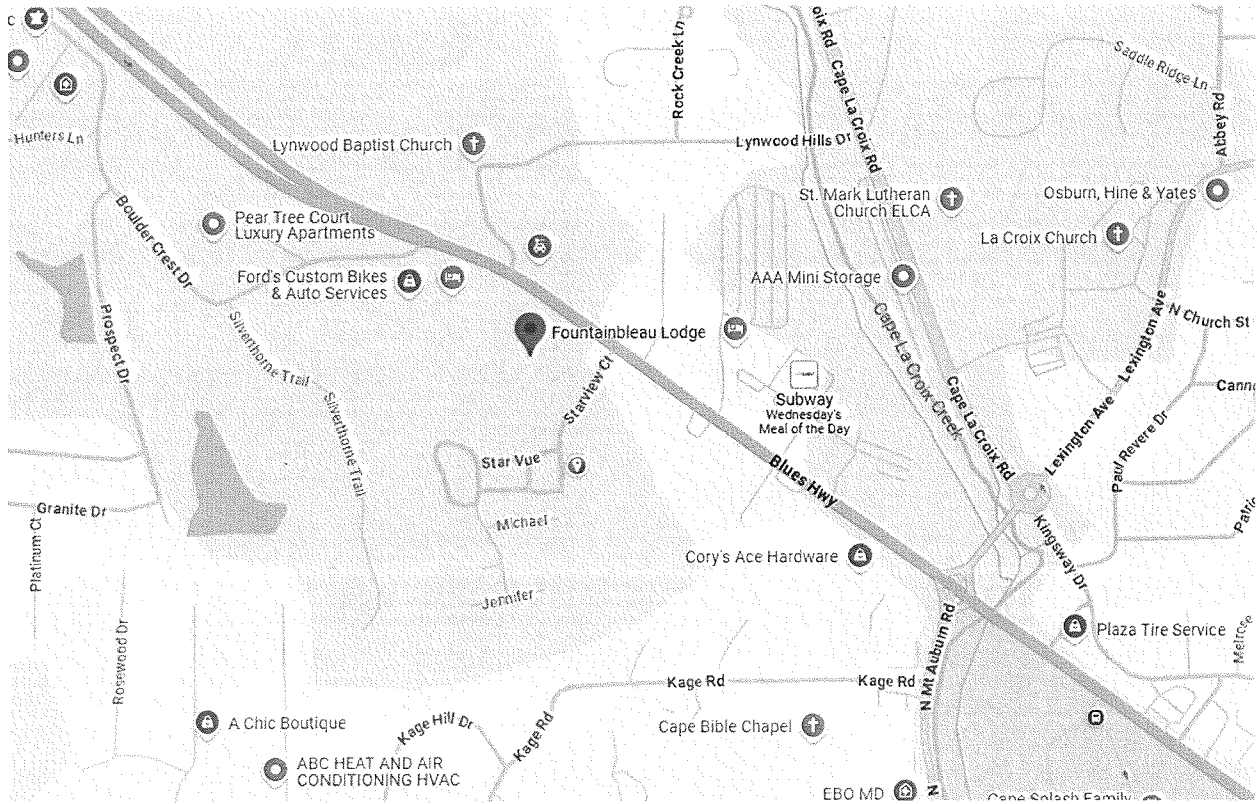
- 16. Document that providers of similar health services in the proposed 15-mile radius have been notified of the application by a public notice in the local newspaper.**

Please see the attached notification published in the Southeast Missourian on June 3, 2025, and again on June 26, 2025, which invites consumers to submit commentary with respect to this project.

- 17. Document that providers of all affected facilities in the proposed 15-mile radius were addressed letters regarding the application.**

See attached.

Location Map

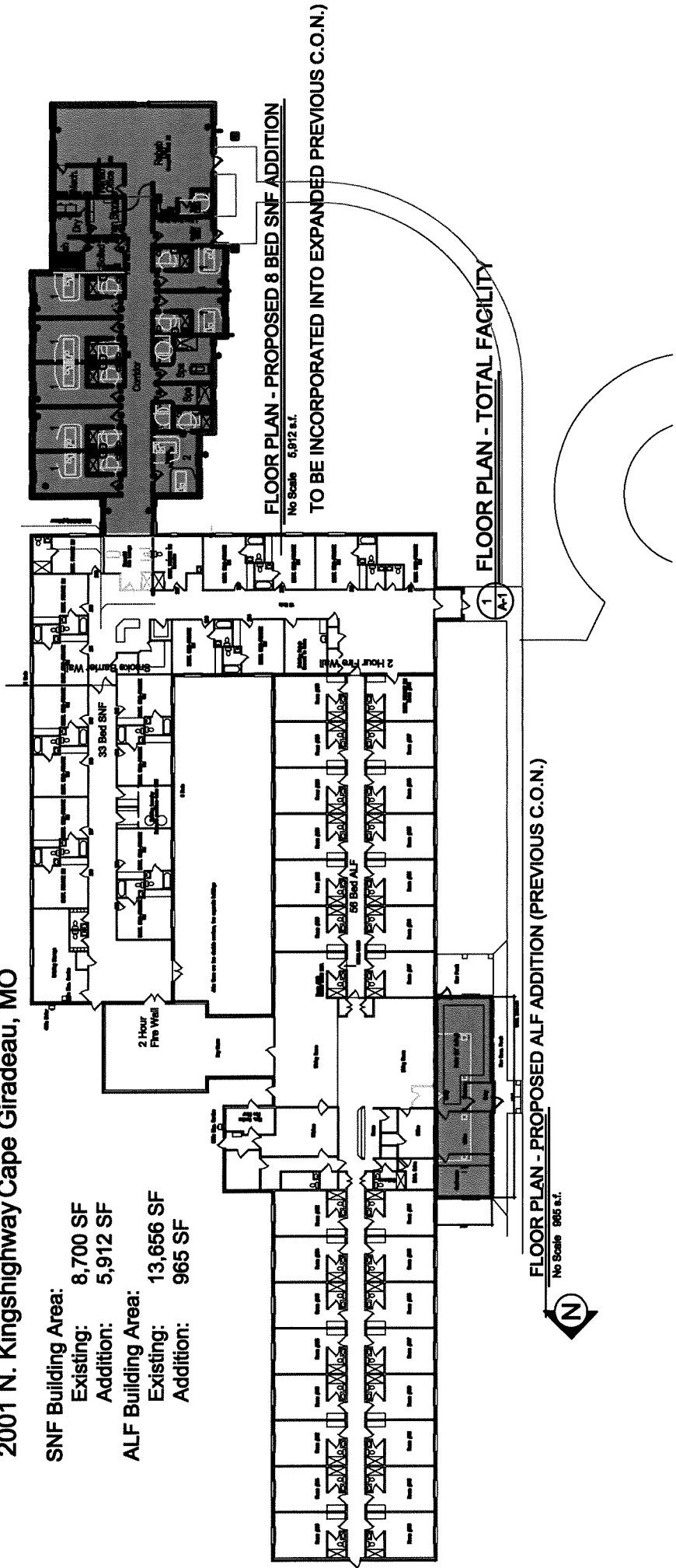


Site Plan

Total Facility Floor Plan Additions to Fountainbleau Lodge

2001 N. Kingshighway Cape Girardeau, MO

SNF Building Area:	
Existing:	8,700 SF
Addition:	5,912 SF
ALF Building Area:	
Existing:	13,656 SF
Addition:	965 SF



Dierks, Haley K.

From: Larry Nelson <larrynelsonarchitect@gmail.com>
Sent: Monday, June 23, 2025 10:25 AM
To: david.east@health.mo.gov; carrie.schaumburg@health.mo.gov; Dierks, Haley K.; Hill, Richard W.
Subject: Fountainbleau Lodge-Cape Girardeau
Attachments: Floor Plan Revised 6-21-25.pdf

In support of the 8 bed addition CON request, I have attached a revised Schematic. The Owner directed on Friday that I "square up" the corners. Otherwise the product remains as submitted last week.

Thank you.

L

Dierks, Haley K.

From: Schaumburg, Carrie <Carrie.Schaumburg@health.mo.gov>
Sent: Monday, June 23, 2025 9:46 AM
To: Larry Nelson; East, David; Hill, Richard W.; Dierks, Haley K.;
regina@fountainbleaulodge.com; shafiqmalik67@gmail.com;
jbardwell@stlouisaltenheim.com
Cc: CONP CONP
Subject: RE: Fountainbleau Lodge-Cape Girardeau
Attachments: New 8 Bed CON Schematic SNF WING.pdf; New 8 Bed CON Schematic Total Facility.pdf

Follow Up Flag: Follow up
Flag Status: Completed

These plans are approved for CON purposes. Please forward us drawings to review prior to construction.

Thank you,



Carrie Schaumburg | Architect

Missouri Department of Health and Senior Services
Engineering Consultation Unit
P.O. Box 570, Jefferson City, MO 65102-0570
573-526-5350 | Carrie.Schaumburg@health.mo.gov

Online Reporting for Abuse and Neglect is now available. Adult abuse and neglect reports can now be made online 24/7, <https://health.mo.gov/safety/abuse/>

For the latest information related to Long-Term Care, please subscribe [here](#) and select "LTCR: Long-Term Care Regulation" under the Subscription Topics

Protecting Health and Keeping People Safe

This email is from the Missouri Department of Health and Senior Services. It contains confidential or privileged information that may be protected from disclosure by law. Unauthorized disclosure, review, copying, distribution, or use of this message or its contents by anyone other than the intended recipient is prohibited. If you are not the intended recipient, please immediately destroy this message and notify the sender at carrie.schaumburg@health.mo.gov or 573-526-5350.

From: Larry Nelson <larrynelsonarchitect@gmail.com>
Sent: Wednesday, June 18, 2025 9:27 AM
To: Schaumburg, Carrie <Carrie.Schaumburg@health.mo.gov>; East, David <David.East@health.mo.gov>;
rhill@lashlybaer.com; hdierks@lashlybaer.com; regina@fountainbleaulodge.com; shafiqmalik67@gmail.com;
jbardwell@stlouisaltenheim.com
Subject: Fountainbleau Lodge-Cape Girardeau

David and Carrie, as a part of the application process for Missouri Certificate of Need, I am attaching the Schematics for a proposed expansion of the previously approved plan. This plan converts three previously proposed offices into private SNF rooms, adds four NEW private SNF rooms, and adds a second bed to the previously approved layout. We have added a smoke barrier wall to the previous layout

due to the additional 24' added to the building. This application will add 8 beds to the license. Please contact me with questions. Thanks.

L

No. 787 Rev. GENERAL WARRANTY DEED.

THIS INDENTURE, Made on the 20th day of December A. D. One Thousand Nine Hundred and Eighty-Five by and between

NARVOL A. RANDOL AND DOROTHY K. RANDOL, husband and wife

of the County of Cape Girardeau in the State of Missouri, Parties of the First Part, and

FOUNTAINBLEAU OF CAPE GIRARDEAU, INC., a Missouri Corporation

of the County of Cape Girardeau, in the State of Missouri, Party of the Second Part:

(mailing address of said first named grantee is 66 Doctor's Park, Cape Girardeau, MO 63701).

WITNESSETH, That the said parties of the First Part, in consideration of the sum of

Ten Dollars and Other Good and Valuable Consideration-----DOLLARS,

to be paid by the said party of the Second Part, the receipt of which is hereby acknowledged, do by these

presents, Grant, Bargain and Sell, Convey and Confirm, unto the said party of the Second Part its heirs and assigns,

the following described Lots, Tracts or Parcels of Land, lying, being and situate in the County of Cape Girardeau and State of Missouri, to-wit: All

Part of U. S. Survey Number 3314, Township 31 North, Range 13 East, commonly called part of the West one-half of the Northwest Quarter of Section 26, Township 31 North, Range 13 East, in the City of Cape Girardeau, Missouri described as follows: Begin at the intersection of the east line of the west one-half of said Northwest Quarter and the south line of U. S. Route No. 61, said point being 60 feet south of the centerline of said Route No. 61, measured normal thereto and opposite Route No. 61 Station 977+03.8; thence North 55° 49' West, with the south line of Route No. 61, 213.9 feet to the point of curve of a 3° 06' curve to the left; thence with said south line on said 3° 06' curve to the left in a northwesterly direction, 186.5 feet; thence with an offset in said south line, North 28° 25' East, 10.0 feet; thence with said south line on a 3° 05' curve to the left in a northwesterly direction, 39.0 feet; thence South 13° 03' West, 112.7 feet; thence South 73° 17' West, 450.6 feet; thence South 0° 08' West, 314.5 feet; thence South 71° 04' East, 56.7 feet; thence South 40° 06' East, 142.2 feet; thence South 56° 40' East, 188.5 feet; thence South 68° 10' East, 134.1 feet; thence South 77° 01' East, 88.2 feet; thence North 82° 47' East, 78.2 feet; thence North 37° 12' East, 169.6 feet; thence North 2° 30' East, 80.6 feet; thence North 5° 42' West, 101.9 feet; thence North 18° 50' East, 117.9 feet; thence North 26° 44' East, 121.1 feet; thence North 44° 21' East, 63.6 feet to the east line of the West one-half of said Northwest Quarter on the south line of Route No. 61; thence North, with said east line and on an offset in the south line of Route No. 61, 18.1 feet to the point of beginning. It is the intent of the grantors to convey the entirety of the property which we purchased from our grantor commonly referred to as Kerasotes Missouri Theatres, Inc. at Book 419, Page 244 of the Land Records.

TO HAVE AND TO HOLD the premises aforesaid, with all and singular the rights, privileges, appurtenances and immunities thereto

belonging or in anywise appertaining unto the said party of the Second Part, and unto its heirs and assigns,

FOREVER, the said Parties of the First Part

hereby covenanting that they are lawfully seized of an indefeasible Estate in Fee in the premises herein conveyed; that

they have good right to convey the same: that the said premises are free and clear of any encumbrance done or

suffered by them or those under whom they claim, and that they will WARRANT AND

DEFEND the title to the said premises unto the said party of the Second Part, and unto its heirs and assigns,

FOREVER, against the lawful claims and demands of all persons whomsoever.

IN WITNESS WHEREOF, the said parties of the First Part have hereunto set their hands the day and year first above written.

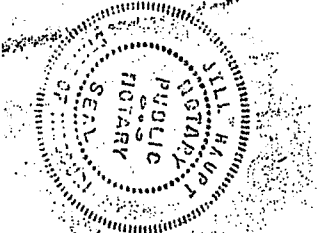
Signed and Delivered in the presence of us,

X *Narvol A. Randol*
NARVOL A. RANDOL
X *Dorothy K. Randol*
DOROTHY K. RANDOL

STATE OF MISSOURI,
COUNTY OF Cape Girardeau } ss. On this 20th day of December 1985

before me personally appeared NARVOL A. RANDOL
and DOROTHY K. RANDOL

his wife, to me known to be the persons described in and who executed the foregoing instrument, and acknowledged that they executed the same as their free act and deed.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Cape Girardeau the day and year first above written.

My term expires August 13 1987

Jilly Haupt
Jilly Haupt, Notary Public

STATE OF MISSOURI,
COUNTY OF } ss. On this day of 19

before me personally appeared

to me known to be the person described in and who executed the foregoing instrument, and acknowledged that the same as free act and deed. And the said

further declared to be single and unmarried.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in the day and year first above written.

My term expires 19

STATE OF MISSOURI,
COUNTY OF Cape Girardeau } ss.

IN THE RECORDER'S OFFICE.

I, JANET ROBERT, Recorder of said County, do hereby certify that the within instrument of writing was, at 2 o'clock and 39 minutes P.M., on the 20th day of December

A. D. 1985, duly filed for record in my office, and is recorded in the records of this office, in book 439 at page 951.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Jackson, Missouri this 20th day

of December A. D. 1985

Janet Robert
JANET ROBERT RECORDER.

GENERAL WARRANTY DEED

FROM

TO

for Record this 20th day

December A. D. 1985

at 2:39 P.M.

Janet Robert
RECORDER.

Janet Robert

DEK'S FEE \$1.00

TERRE BANK OF CAPE GIRARDEAU

BOX 70

E GIRARDEAU, MO 63701

CPH Legal / Fountainbleau Addition

Publisher's Affidavit

STATE OF MISSOURI} SS

COUNTY OF CAPE GIRARDEAU}

Before me, the undersigned, a Notary Public, this day personally came **Sherry Cole**

who, being first duly sworn, according to law upon his/her oath, says that he/she is **Bookkeeper** of the Southeast Missourian, a newspaper published in the city of Cape Girardeau, in Cape Girardeau County and State of Missouri, and that the publication, of which the annexed is a true copy, was published in said paper on the following dates:

6/3/2025

(appearing once a day on the same day of each week) and further says that said Newspaper is a daily newspaper printed and published in the City of Cape Girardeau and State of Missouri and has a general circulation in the City of Cape Girardeau and State of Missouri and has a general circulation in the City and County of Cape Girardeau and State of Missouri, and has held such general circulation in said county continuously, regularly and consecutively for a period of more than ten years next before the date of the first publication mentioned above, and has been likewise continuously, regularly and consecutively published up to the time of the making of this affidavit for a period of more than ten years next before the date of the jurat to this publisher's affidavit or proof of publication, and that the rate charged therefore is not in excess of the rate allowed by laws of the State of Missouri, and that said Southeast Missourian has been admitted to the United States Post Office as second class matter in the City of Cape Girardeau, Missouri; and that said newspapers has a list of bona fide subscribers voluntarily engaged as such who have paid or agreed to pay a stated price for a subscription for a definite period of time, and that said newspaper and its publishers have complied with each and every provision of the laws of Missouri and particularly with the provisions of Section 13775 of the Revised Statutes of Missouri, 1929, as amended, and approved on May 14, 1931, as appears in the Laws of Missouri, 1931 at page 303.

Sherry Cole

Subscribed and sworn to me this 3 Jun 2025

Tonja Hemphill
Notary Public, State of Missouri

Qualified and commissioned for a term expiring

October 12, 2025

Publication Fee: \$25.78

Cape Girardeau, MO

Southeast Missourian

TONJA HEMPHILL
Notary Public - Notary Seal
State of Missouri
Commissioned for Cape Girardeau County
My Commission Expires: October 12, 2025
Commission Number: 13881343

Fountainbleau of Cape Girardeau, Inc. is seeking Certificate of Need Approval to construct an approximately 1,300 square foot addition to add 8 skilled nursing facility beds to the Fountainbleau Lodge located at 2001 North Kingshighway, Cape Girardeau MO 63701. Comments should be addressed to Richard Hill at 714 Locust Street, Saint Louis MO 63101, or at rhill@lashlybaer.com (June 3, 2025)

CPH Legal / Fountainbleau - Amended Notice

Publisher's Affidavit

STATE OF MISSOURI} SS

COUNTY OF CAPE GIRARDEAU}

Before me, the undersigned, a Notary Public, this day personally came **Sherry Cole**

who, being first duly sworn, according to law upon his/her oath, says that he/she is **Bookkeeper** of the Southeast Missourian, a newspaper published in the city of Cape Girardeau, in Cape Girardeau County and State of Missouri, and that the publication, of which the annexed is a true copy, was published in said paper on the following dates:

6/26/2025

(appearing once a day on the same day of each week) and further says that said Newspaper is a daily newspaper printed and published in the City of Cape Girardeau and State of Missouri and has a general circulation in the City of Cape Girardeau and State of Missouri and has a general circulation in the City and County of Cape Girardeau and State of Missouri, and has held such general circulation in said county continuously, regularly and consecutively for a period of more than ten years next before the date of the first publication mentioned above, and has been likewise continuously, regularly and consecutively published up to the time of the making of this affidavit for a period of more than ten years next before the date of the jurat to this publisher's affidavit or proof of publication, and that the rate charged therefore is not in excess of the rate allowed by laws of the State of Missouri, and that said Southeast Missourian has been admitted to the United States Post Office as second class matter in the City of Cape Girardeau, Missouri; and that said newspapers has a list of bona fide subscribers voluntarily engaged as such who have paid or agreed to pay a stated price for a subscription for a definite period of time, and that said newspaper and its publishers have complied with each and every provision of the laws of Missouri and particularly with the provisions of Section 13775 of the Revised Statutes of Missouri, 1929, as amended, and approved on May 14, 1931, as appears in the Laws of Missouri, 1931 at page 303.

Sherry Cole

Subscribed and sworn to me this 26 Jun 2025

Tonja Hemphill
Notary Public, State of Missouri

Qualified and commissioned for a term expiring

October 12, 2025

Publication Fee: \$31.50

Cape Girardeau, MO
Southeast Missourian

TONJA HEMPHILL
Notary Public - Notary Seal
State of Missouri
Commissioned for Cape Girardeau County
My Commission Expires: October 12, 2025
Commission Number: 13881343

Fountainbleau of Cape Girardeau, Inc. is amending its previous notice published on June 3, 2025, to reflect that it is seeking Certificate of Need Approval to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to the Fountainbleau Lodge located at 2001 North Kingshighway, Cape Girardeau MO 63701. Comments should be addressed to Richard Hill at 714 Locust Street, Saint Louis, MO 63101, or at rhill@lashlybaer.com.
(June 26, 2025)



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

RICHARD W. HILL
Licensed in Missouri
DIRECT: 314 436.8317
rhill@lashlybaer.com

MISSOURI
714 Locust Street
St. Louis, MO 63101-1699
TEL: 314 621.2939
FAX: 314 621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233.5587
By Appointment Only

June 25, 2025

Heartland Care & Rehabilitation Center
Attn: Administrator
2525 Boutin Dr
Cape Girardeau, MO 63701

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

RICHARD W. HILL
Licensed in Missouri
DIRECT: 314.436.8317
rhill@lashlybaer.com

MISSOURI
714 Locust Street
St. Louis, MO 63101-1699
TEL: 314.621.2939
FAX: 314.621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618.233.5587
By Appointment Only

June 25, 2025

Chateau Girardeau
Attn: Administrator
3120 Independence St
Cape Girardeau, MO 63703

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



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St. Louis, MO 63101-1699
TEL: 314.621.2939
FAX: 314.621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618.235.5587
By Appointment Only

June 25, 2025

Life Care Center of Cape Girardeau
Attn: Administrator
365 S Broadview St
Cape Girardeau, MO 63703

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



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Licensed in Missouri
DIRECT: 314 436.8317
rhill@lashlybaer.com

MISSOURI
714 Locust Street
St. Louis, MO 63101-1699
TEL: 314 621.2959
FAX: 314 621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233.5587
By Appointment Only

June 25, 2025

The Lutheran Home
Attn: Administrator
2825 Bloomfield Rd
Cape Girardeau, MO 63703

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



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St. Louis, MO 63101-1699
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FAX: 314 621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233.5587
By Appointment Only

June 25, 2025

Monticello House
Attn: Administrator
1115 K Land Dr
Jackson, MO 63755

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



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rhill@lashlybaer.com

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714 Locust Street
St. Louis, MO 63101-1699
TEL: 314 621.2939
FAX: 314 621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233.5587
By Appointment Only

June 25, 2025

Ratliff Care Center
Attn: Administrator
717 North Sprigg
Cape Girardeau, MO 63701

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

RICHARD W. HILL
Licensed in Missouri
DIRECT: 314 436.8317
rhill@lashlybaer.com

MISSOURI
714 Locust Street
St. Louis, MO 63101-1699
TEL: 314 621.2939
FAX: 314 621.6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233.5587
By Appointment Only

June 25, 2025

Chaffee Nursing Center
Attn: Administrator
12273 State Highway 77
Chaffee, MO 63740

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

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Licensed in Missouri
DIRECT: 314.436.8317
rhill@lashlybaer.com

MISSOURI
714 Locust Street
St. Louis, MO 63101-1699
TEL: 314 621 2939
FAX: 314 621 6844
www.lashlybaer.com

ILLINOIS
20 East Main Street
Belleville, IL 62220-1602
TEL: 618 233 5587
By Appointment Only

June 25, 2025

Jackson Manor
Attn: Administrator
710 Broadridge Dr
Jackson, MO 63755

RE: Fountainbleau Lodge – Cape Girardeau – Project # 6218 NS

To Whom this May Concern:

Please be advised that Fountainbleau of Cape Girardeau, Inc. will submit and/or has submitted a Certificate of Need application to construct an approximately 1,700 square foot addition to add 8 skilled nursing facility beds to its existing campus located at 2001 North Kingshighway, Cape Girardeau, MO 63701. Renovations for the existing campus are approved pursuant to CON project # 6132 NT.

Very truly yours,

Richard W. Hill
Richard W. Hill

RWH/

9589 0710 5270 0636 8462 22

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$ 9.64

Total Postage and Fees
\$ 9.64

Sent To
Ratliff Care Center
Attn: Administrator
Street and Apt. No., or PO Box No.
717 North Sprigg
City, State, ZIP+4®
Cape Girardeau, MO 63701

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

JEFFERSON MEMORIAL
JUN 25 2025
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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$ 9.64

Total Postage and Fees
\$ 9.64

Sent To
The Lutheran Home
Attn: Administrator
Street and Apt. No., or PO Box No.
2825 Bloomfield Rd
City, State, ZIP+4®
Cape Girardeau, MO 63703

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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JUN 25 2025
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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$ 9.64

Total Postage and Fees
\$ 9.64

Sent To
Jackson Manor
Attn: Administrator
Street and Apt. No., or PO Box No.
710 Broadridge Dr
City, State, ZIP+4®
Jackson, MO 63755

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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JUN 25 2025
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Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$ 9.64

Total Postage and Fees
\$ 9.64

Sent To
Chaffee Nursing Center
Attn: Administrator
Street and Apt. No., or PO Box No.
12273 State Highway 77
City, State, ZIP+4®
Chaffee, MO 63740

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

JEFFERSON MEMORIAL
JUN 25 2025
40094.1
RWH

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☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$ 9.64
 Total Postage and Fees \$ 40094.1
 Life Care Center of Cape Girardeau RWH

Sent To
 Attn: Administrator
 Street and Apt. No., or PO Box No.
 365 S Broadview St
 City, State, ZIP+4®
 Cape Girardeau, MO 63703

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate):
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$ 9.64
 Total Postage and Fees \$
 Monticello House

Sent To
 Attn: Administrator
 Street and Apt. No., or PO Box No.
 1115 K Land Dr
 City, State, ZIP+4®
 Jackson, MO 63755

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

7022 3330 0001 1979 3176

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Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate):
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$ 9.64
 Total Postage and Fees \$ 40094.1

Sent To
 Attn: Administrator
 Street and Apt. No., or PO Box No.
 2525 Boutin Dr
 City, State, ZIP+4®
 Cape Girardeau, MO 63701

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate):
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$ 9.64
 Total Postage and Fees \$
 Chateau Girardeau

Sent To
 Attn: Administrator
 Street and Apt. No., or PO Box No.
 3120 Independence St
 City, State, ZIP+4®
 Cape Girardeau, MO 63703

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

DIVIDER III

SERVICE SPECIFIC CRITERIA AND STANDARDS

DIVIDER III. SERVICE SPECIFIC CRITERIA AND STANDARDS

- 1. For ICF/SNF beds, address the population-based bed need methodology of fifty-three (53) beds per one thousand (1,000) population age sixty-five (65) and older.**

The Department of Health and Senior Services provided the maps and 2030 population data for individuals aged 65 and older for those zip codes and cities within 15 miles of the proposed facility. The population data, facilities list, and calculations are attached (See Schedules 1 through 3).

$$\text{Unmet need} = [(R \times P) - U]$$

$$R = \text{CON Need Coefficient for ICF/SNF} = 53/1000$$

$$P = \text{2030 Population aged 65 and older in 15-mile radius} = 19,607$$

$$U = \text{\# of ICF/SNF beds in 15-mile radius} = 916$$

$$\text{Unmet Need} = [(0.053 \times 19,607) - 916] = 123 \text{ SNF BED NEED}$$

- 2. For RCF/ALF beds, address the population-based bed need methodology of twenty-five (25) beds per one thousand (1,000) population age sixty-five (65) and older.**

Not applicable.

- 3. For LTCH beds, address the population-based bed need methodology of one-tenth (0.1) bed per one thousand (1,000) population.**

Not applicable.

- 4. Document any alternate need methodology used to determine the need for additional beds such as Alzheimer's, mental health or other specialty beds.**

Not applicable.

- 5. For any proposed facility which is designed and operated exclusively for persons with acquired human immunodeficiency syndrome (AIDS) provide information to justify the need for the type of beds being proposed.**

Not applicable.

- 6. If the project is to add beds to an existing facility, has the facility received a Notice of Noncompliance within the last 18 months as a result of a survey, inspection or complaint investigation? If the answer is yes, explain**

None.

Fountainbleau Lodge
Add SNF Beds
Need Analysis

Schedule 1

Table 1 - Standard MHFRC Analysis

	A	B
1	2030 65+ Population in 15 Mile Radius (1)	19,607
2	SNF / ICF Need Ratio	0.053
3	Line 1 * Line 2	1,039
4	Total Beds [Line 5 + Line 6 + Line 7]	916
5	SNF Licensed Beds (2)	916
6	ICF Licensed Beds (2)	0
7	CON Approved Beds (2)	0
8	Standard MHFRC Need [Line 3 - Line 4]	123

Notes

- 1** See Schedule 2.
- 2** See Schedule 3.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Fountainbleau Lodge														
2	Add SNF Beds														
3	Population Analysis														
4	POPULATION- 65+			Project Number:			Project Address:			2001 North Kingshighway, Cape Girardeau, MO 63701					
5		Zip In Radius	Pop in Zip	City in Zip	City Pop	% of City in Zip	City Pop in ZIP	Total Cities' Pop in Zip	Zip Pop W/O Cities' Pop	% of Zip Area in Radius	Zip Pop in Radius	% City in Zip & Radius	City Pop in Zip & Radius	Total Cities' Pop in Zip & Radius	Zip Pop w City Pop in Zip & Radius
6	1	63701	7,946	Cape Girardeau	8,849	70%	6,194	6,384	1,562	100%	1,562	70%	6,194	6,384	7,946
7				Dutchtown	59	90%	53					90%	53		
8				Gordonville	137	100%	137					100%	137		
9	2	63703	2,321	Cape Girardeau	8,849	25%	2,212	2,212	109	100%	109	25%	2,212	2,212	2,321
10							0						0		
11							0						0		
12	3	63730	716	Advance	336	100%	336	336	380	5%	19	0%	0	0	19
13							0						0		
14							0						0		
15	4	63732	190	Altenburg	66	100%	66	81	109	5%	5	0%	0	1	6
16				Frohna	59	5%	3					0%	0		
17				New Wells	12	100%	12					5%	1		
18	5	63736	734	Benton	204	100%	204	219	515	5%	26	0%	0	10	36
19				Lambert	5	100%	5					0%	0		
20				New Hamburg	41	25%	10					25%	10		
21	6	63739	166	Burfordville	21	100%	21	21	145	100%	145	100%	21	21	166
22							0						0		
23							0						0		
24	7	63740	1,130	Allenville	22	100%	22	85	1,045	95%	992	100%	22	85	1,078
25				Chaffee	659	100%	0					100%	0		
26				Delta	93	35%	33					35%	33		
27				New Hamburg	41	75%	31					75%	31		
28	8	63742	8	Commerce	7	100%	7	7	1	100%	1	100%	7	7	8
29							0						0		
30							0						0		
31	9	63744	69	Delta	93	65%	60	60	9	100%	9	65%	60	60	69
32							0						0		
33							0						0		
34	10	63745	9	Dutchtown	59	10%	6	6	3	100%	3	10%	6	6	9
35							0						0		
36							0						0		

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	Fountainbleau Lodge														
2	Add SNF Beds														
3	Population Analysis														
4	POPULATION- 65+			Project Number:			Project Address:			2001 North Kingshighway, Cape Girardeau, MO 63701					
5		Zip In Radius	Pop in Zip	City in Zip	City Pop	% of City in Zip	City Pop in Zip	Total Cities' Pop in Zip	Zip Pop W/O Cities' Pop	% of Zip Area in Radius	Zip Pop In Radius W/O Cities' Pop	% City in Zip & Radius	City Pop in Zip & Radius	Total Cities' Pop in Zip & Radius	Zip Pop w City Pop in Zip & Radius
37	11	63755	6,369	Cape Girardeau	8,849	0%	0	3,672	2,697	95%	2,562	0%	0	3,640	6,202
38				Jackson	3,612	100%	3,612					100%	3,612		
39				Millersville	32	5%	2					5%	2		
40				Oak Ridge	47	5%	2					5%	2		
41				Pocahontas	24	100%	24					100%	24		
42				Shawneetown	32	100%	32					0%	0		
43	12	63758	164	Kelso	124	85%	105	105	59	100%	59	85%	105	105	164
44							0						0		
45							0						0		
46	13	63764	954	Marble Hill	334	100%	334	334	620	0%	0	0%	0	0	0
47							0						0		
48							0						0		
49	14	63766	257	Millersville	32	95%	30	30	227	25%	57	25%	8	8	65
50							0						0		
51							0						0		
52	15	63769	371	Oak Ridge	47	95%	45	45	326	30%	98	95%	45	45	143
53							0						0		
54							0						0		
55	16	63771	555	Haywood City	25	100%	25	275	280	0%	0	0%	0	0	0
56				Morley	167	0%	0					0%	0		
57				Oran	250	100%	250					0%	0		
58	17	63780	1,222	Cape Girardeau	8,849	5%	442	1,334	-112	90%	-101	5%	442	1,334	1,233
59				Kelso	124	15%	19					15%	19		
60				Scott City	873	100%	873					100%	873		
61	18	63785	206	Whitewater	24	100%	24	24	182	65%	118	100%	24	24	142
62							0						0		
63							0						0		
64			23,387		43,057		15,232	15,232	8,155		5,663		13,943	13,943	19,607

Fountainbleau Lodge
Add SNF Beds
Need Analysis

	A County	B Facility Name	C Address	D City	E Zip	F CON Approve d Beds	G Licensed SNF Beds	H Licensed ICF Beds	I Total Licensed Beds	J 4th Qtr 2023 Occup %	K 1st Qtr 2024 Occup %	L 2nd Qtr 2024 Occup %	M 3rd Qtr 2024 Occup %	N 4th Qtr 2024 Occup %	O 1st Qtr 2025 Pat Days	P 1st Qtr 2025 Occup Days	Q 1st Qtr 2025 Occup %	R Average Occup %
1	Cape Girardeau	Chateau Girardeau	3120 Independence St	Cape Girardeau	63703	0	75	0	75	88.1%	86.9%	86.9%	79.9%	84.6%	5,543	4,547	82.0%	84.7%
2	Cape Girardeau	Fountainbleau Lodge	2001 North Kingshighway	Cape Girardeau	63701	0	33	0	33	84.3%	87.2%	82.6%	87.8%	94.8%	2,970	2,778	93.5%	88.4%
3	Cape Girardeau	Heartland Care & Rehabilitation Center	2525 Boutin Dr	Cape Girardeau	63701	0	102	0	102	74.3%	74.2%	74.2%	76.5%	71.6%	9,180	6,550	71.4%	73.7%
4	Cape Girardeau	Jackson Manor	710 Broadridge Dr	Jackson	63755	0	90	0	90	76.3%	76.5%	77.9%	73.9%	72.1%	8,100	5,658	69.9%	74.4%
5	Cape Girardeau	Life Care Center of Cape Girardeau	365 S Broadview St	Cape Girardeau	63703	0	120	0	120	88.0%	90.2%	90.2%	84.7%	78.6%	10,800	8,877	82.2%	85.1%
6	Cape Girardeau	Lutheran Home, The	2825 Bloomfield Rd	Cape Girardeau	63703	0	274	0	274	61.3%	64.7%	63.6%	64.0%	67.9%	23,940	15,594	65.1%	64.4%
7	Cape Girardeau	Monticello House	1115 K Land Dr	Jackson	63755	0	105	0	105	38.1%	39.0%	37.9%	39.3%	48.0%	9,450	3,853	40.8%	40.5%
8	Cape Girardeau	Radiant Care Center	717 North Sprigg	Cape Girardeau	63701	0	46	0	46	88.6%	83.5%	90.6%	87.2%	88.2%	3,960	3,420	86.4%	87.2%
9	Scott	Chaffee Nursing Center	12273 State Highway 77	Chaffee	63740	0	71	0	71	86.8%	89.2%	86.8%	86.3%	88.2%	6,210	5,342	86.0%	87.2%
10	Total																	
						0	916	0	916									

DIVIDER IV

FINANCIAL FEASIBILITY REVIEW CRITERIA AND STANDARDS

DIVIDER IV. FINANCIAL FEASIBILITY REVIEW CRITERIA AND STANDARDS

- 1. Document that the proposed costs per square foot are reasonable when compared to the latest “RS Means Construction Cost data”.**

The RS Means Construction Cost Data for the area at the 75th percentile is \$ 258.88 per square foot for SNFs and at the median is \$ 196.45 per square foot for SNFs. Accordingly, the project’s new construction cost of \$210.11 per square foot is just above the 75th percentile established by the RS Means Construction Cost Data.

- 2. Document that sufficient financing is available by providing a letter from a financial institution or an auditor’s statement indicating that sufficient funds are available.**

See attached.

- 3. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) for the latest three (3) years and projected through three (3) FULL years beyond project completion.**

See attached. Overhead includes utilities, insurance, maintenance and administrative expenses.

- 4. Document how patient charges are derived.**

Patient charges are derived in comparison to current Medicaid rates and private rates of facilities in the surrounding area.

- 5. Document responsiveness to the needs of the medically indigent.**

The Applicant works with financially disadvantaged patients in assisting to apply for Medicaid coverage.

- 6. For a proposed new skilled nursing or intermediate care facility, what percentage of your admissions would be Medicaid eligible on the first day of admission or become Medicaid eligible within 90 days of admission?**

Not applicable.

- 7. For an existing skilled nursing or intermediate care facility, what percentage of your admissions are Medicaid eligible on the first day of admission or becomes Medicaid eligible within 90 days of admission.**

90%



June 16, 2025

Mr. Shafiq Malik
Fountainbleau Lodge
2001 North Kingshighway
Cape Girardeau, MO 63701

Re: Fountainbleau Lodge Renovation and Modernization

Dear Mr. Malik

We are pleased to inform you that Montgomery Bank has approved financing for the renovation of the Fountainbleau Lodge located at 2001 N. Kingshighway Cape Girardeau, MO for \$2,000,000.

This letter of commitment as provided is to be included with the Certificate of Need application to be filed with the State of Missouri.

Again, it is our pleasure to extend this lending commitment. We look forward to a mutually beneficial and long-lasting banking relationship.

Sincerely,

Scott Ringwald
Senior Commercial Lender



**SERVICE-SPECIFIC REVENUES AND EXPENSES****Project Title:** FOUNTAINBLEAU LODGE-ADD SNF **Project #:** 6218 NS**Historical Financial Data for Latest Three Full Years plus
Projections Through Three Full Years Beyond Project Completion**

*Use an individual form for each affected service with a
sufficient number of copies of this form to cover entire period,
and fill in the years in the appropriate blanks.*

	Year		
	<u>2022</u>	<u>2023</u>	<u>2024</u>
Amount of Utilization:*	<u>8,191</u>	<u>8,311</u>	<u>8,455</u>
Revenue:			
Average Charge**	<u>\$176</u>	<u>\$182</u>	<u>\$202</u>
Gross Revenue	<u>\$1,441,616</u>	<u>\$1,512,602</u>	<u>\$1,707,910</u>
Revenue Deductions	<u>24,613</u>	<u>26,021</u>	<u>29,031</u>
Operating Revenue	<u>1,417,003</u>	<u>1,486,581</u>	<u>1,678,879</u>
Other Revenue	<u>5,000</u>	<u>4,374</u>	<u>6,650</u>
TOTAL REVENUE	<u>\$1,422,003</u>	<u>\$1,490,955</u>	<u>\$1,685,529</u>
Expenses:			
Direct Expenses			
Salaries	<u>688,996</u>	<u>720,216</u>	<u>836,836</u>
Fees	<u>167,740</u>	<u>178,510</u>	<u>202,910</u>
Supplies	<u>165,425</u>	<u>176,802</u>	<u>152,183</u>
Other	<u>0</u>	<u>0</u>	<u>0</u>
TOTAL DIRECT	<u>\$1,022,161</u>	<u>\$1,075,528</u>	<u>\$1,191,929</u>
Indirect Expenses			
Depreciation	<u>43,994</u>	<u>44,407</u>	<u>45,173</u>
Interest***	<u>0</u>	<u>0</u>	<u>0</u>
Rent/Lease	<u>0</u>	<u>0</u>	<u>0</u>
Overhead****	<u>331,039</u>	<u>362,201</u>	<u>435,036</u>
TOTAL INDIRECT	<u>\$375,033</u>	<u>\$406,608</u>	<u>\$480,209</u>
TOTAL EXPENSES	<u>\$1,397,194</u>	<u>\$1,482,136</u>	<u>\$1,672,138</u>
NET INCOME (LOSS):	<u>\$24,809</u>	<u>\$8,819</u>	<u>\$13,391</u>

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment,
or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

***Only on long term debt, not construction.

****Indicate how overhead was calculated.

**SERVICE-SPECIFIC REVENUES AND EXPENSES****Project Title:** FOUNTAINBLEAU LODGE-ADD SNF **Project #:** 6218 NS**Historical Financial Data for Latest Three Full Years plus
Projections Through Three Full Years Beyond Project Completion**

*Use an individual form for each affected service with a
sufficient number of copies of this form to cover entire period,
and fill in the years in the appropriate blanks.*

	Year		
	<u>2026</u>	<u>2027</u>	<u>2028</u>
Amount of Utilization:*	<u>10,476</u>	<u>10,685</u>	<u>10,895</u>
Revenue:			
Average Charge**	<u>\$229</u>	<u>\$234</u>	<u>\$239</u>
Gross Revenue	<u>\$2,399,004</u>	<u>\$2,500,290</u>	<u>\$2,603,905</u>
Revenue Deductions	<u>36,718</u>	<u>37,549</u>	<u>38,441</u>
Operating Revenue	<u>2,362,286</u>	<u>2,462,741</u>	<u>2,565,464</u>
Other Revenue	<u>6,850</u>	<u>6,987</u>	<u>7,127</u>
TOTAL REVENUE	<u>\$2,369,136</u>	<u>\$2,469,728</u>	<u>\$2,572,591</u>
Expenses:			
Direct Expenses			
Salaries	<u>962,361</u>	<u>991,230</u>	<u>1,011,050</u>
Fees	<u>233,346</u>	<u>240,937</u>	<u>261,597</u>
Supplies	<u>175,010</u>	<u>188,559</u>	<u>189,076</u>
Other	<u>0</u>	<u>0</u>	<u>0</u>
TOTAL DIRECT	<u>\$1,370,717</u>	<u>\$1,420,726</u>	<u>\$1,461,723</u>
Indirect Expenses			
Depreciation	<u>46,528</u>	<u>47,923</u>	<u>52,715</u>
Interest***	<u>306,000</u>	<u>312,120</u>	<u>321,483</u>
Rent/Lease	<u>0</u>	<u>0</u>	<u>0</u>
Overhead****	<u>575,291</u>	<u>582,550</u>	<u>626,850</u>
TOTAL INDIRECT	<u>\$927,819</u>	<u>\$942,593</u>	<u>\$1,001,048</u>
TOTAL EXPENSES	<u>\$2,298,536</u>	<u>\$2,363,319</u>	<u>\$2,462,771</u>
NET INCOME (LOSS):	<u>\$70,600</u>	<u>\$106,409</u>	<u>\$109,820</u>

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment,
or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

***Only on long term debt, not construction.

****Indicate how overhead was calculated.