



JOSH STEIN
GOVERNOR

STATE OF NORTH CAROLINA
OFFICE OF THE GOVERNOR

August 17, 2026

Rear Admiral Donald R. Gintzig (Ret.)
President and Chief Executive Officer
WakeMed
3000 New Bern Ave.
Raleigh, NC 27610

Dear Rear Admiral Gintzig (Ret.),

North Carolinians rely on high quality, affordable health care. WakeMed has long provided access to such care in Wake County. WakeMed's recently announced proposed combination with Atrium Health will therefore have a significant effect on health care in Wake County and beyond. Accordingly, the proposed combination deserves close scrutiny and careful consideration.

I appreciate your providing our office with information and data about the proposed combination and your team's responsiveness to my questions. Having reviewed the information you provided, I have the following additional questions:

1. Why did WakeMed decide to seek a combination? What other financing or strategic options were considered to enable greater capital investment and long-term sustainability?
2. Hospital mergers often lead to higher prices. At least one study shows that in-state, cross-market mergers like the one proposed here increase prices by seven to nine percent. What guarantees has Atrium provided to ensure that WakeMed's prices will not increase if the combination is consummated? Has Atrium committed not to tie access to its Charlotte and Triad facilities to access to WakeMed facilities in negotiations with insurers?
3. Why did WakeMed agree to a governance structure that limits the Wake County Board of Commissioners' role in selecting the WakeMed Board of Directors to merely vetoing the WakeMed Board of Directors' nominees for the eight Community Directors who serve on the fourteen-member Board of Directors? Similarly, why did WakeMed agree to a governance structure that asymmetrically allows Atrium to remove Community Directors, including for a lack of collegiality?

4. Currently, WakeMed devotes more than 12 percent of revenue to financial assistance for indigent patients, significantly more than the 4.8 percent it is required to provide as part of the Transfer Agreement with Wake County. But if the proposed combination with Atrium is consummated, the excess revenue that WakeMed has used to provide more robust indigent care could instead flow to Atrium. Has Atrium committed to keeping that excess revenue in WakeMed for indigent care? If not, what guarantees has Atrium provided to ensure that WakeMed continues to devote more than 12 percent of revenue to indigent care?
5. WakeMed and Atrium have highlighted that \$2 billion in capital expenditures over ten years have been promised as a benefit of the proposed combination. Will revenue generated by WakeMed account for part of that \$2 billion? Has WakeMed asked Atrium to invest the full \$2 billion? Has WakeMed assured itself that it could not secure greater investment from Atrium or other potential partners? If so, how?

Sincerely,

South A. Moore

cc: Don Mial, Chair, Wake County Board of Commissioners
Safiyah Jackson, Vice Chair, Wake County Board of Commissioners
Cheryl Stallings, Wake County Board of Commissioners
Susan Evans, Wake County Board of Commissioners
Tara Waters, Wake County Board of Commissioners
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