| Facility/Service Type | Project Description | Date Application Received | Deadline to Notify Applicant (5 business days After Receipt of Request) | Date Notification to Applicant Sent | Statutory Deadline to Complete (45 days from Receipt of Application) | Additional Info Requested (Y/N) | Date Additional Info Received | Date DR Completed & Mailed |
|--|---|---------------------------------|---|---|--|---------------------------------------|--|----------------------------------|
| Hospital | Merit Health Woman's Hospital Offering of Intraoperative Services Capital Expenditure: | g /20 /2000 | 0/0/0000 | | | Ÿ | 9/15/20 | |
| Physician Clinic | \$667,689.00 Gulf Coast Vascular Care LLC Offering of Non-Digital Angiography Services in Outpatient Vascular Center Capital Expendenditure: \$338,634.00 | 8/28/2020 9/4/20 | 9/2/2020 9/9/20 | 9/3/2020 | 10/12/2020 | N | N/A | 10/9/20 |
| ESRD | RCG Mississippi, Inc. d/b/a RCG McComb Expansion of ESRD Facility at Existing ESRD | 9/11/20 | 9/16/20 | 9/8/2020 | 10/26/20 | Y | 9/21/20 | 10/9/20 |
| Single Specialty Ambulatory Surgery Center | Capital Expenditure:\$0 Madison Physician Surgery Center, LLC d/b/a Mississippi Sports edicine and Orthopaedic Center Surgery Center Single Specialty Ambulatory Surgery Facility-Orthopaedics Capital Expenditure: \$ 0 | 9/17/20 | 9/22/20 | 9/14/2020 9/21/20 | 11/1/20 (Sunday) 11/2/20 (Monday) | Y | 10/15/20 | 10/5/20 |
| | Cardiovascular Institute of Mississippi LLC, d/b/a Vascular Access Clinic Establishment of Non-Digital Angiography Services in Outpatient Cascular Center Capital Expenditure:\$186,774.00 | 9/24/2020 | 9/29/2020 | 9/29/20 | 11/8/20 (Sunday) 11/9/20 | • | 10/15/20 | |
| iingle Specialty Ambulatory | SOG Surgery Center, LLC d/b/a Specialty Orthopedic Group Orthopedic (Addition of a Physician) Capital Expenditure: \$0.00 | 9/30/2020 | 10/5/2020 | 10/2/20 | (Monday) 11/14/2020 (Saturday) 11/16/20 (Monday) | Y | 10/1/2020 10/2/2020 10/5/2020 10/5/2020 10/23/2020 | 10/19/20 10/26/20 |

Columns in Red = Deadlines set by statute or policy

Determination of Reviewability

| As of Week Ending 10/30/20 |
|---------------------------------|
| Note: Projects remain on Report |
| for 30 days after completion. |
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| Facility/Service Type | Project Description | Date Application Received | Deadline to Notify Applicant (5 business days After Receipt of Request) | Date Notification to Applicant Sent | Statutory Deadline to Complete (45 days from Receipt of | Additional Info Requested (Y/N) | Date Additional Info Received | Date DR Completed & Mailed |
|--------------------------|-------------------------------|---------------------------------|---|---|---|---------------------------------------|----------------------------------|----------------------------------|
| | | | | | Application) | | | |
| | Desoto Imaging & Diagnostics, | | | 10/22/20 | | | | |
| | LLC dba Desoto Imaging | | | | 12/5/2020 | | | |
| | Specialists MRI Replacement | | | | (Saturday) | | | |
| | Project Capital | | | | 12/7/2020 | | | |
| MRI | Expenditure: \$1,019,226.96 | 10/21/2020 | 10/26/2020 | | (Monday) | | | |

| Project Name and Description | Date Received | Earliest Date CON Application May Be Filed (15 days from date | Date NOI Expires (6 months from date NOI |
|---|---------------|--|--|
| | | NOI Received) | Received) |
| Jefferson County Hospital | | | |
| Behavioral Health Unit | | | |
| Acute Psychiatric Beds for Adults | 4/10/2020 | 4/25/2020 | 10/10/2020 |
| Singing River Health System d/b/a Ocean Springs Hospital | | | |
| Fixed PET Scanner and Services | 4/16/2020 | 5/1/2020 | 10/16/2020 |
| HiFidelity Imaging, LLC Establishment of Freestanding Fixed MRI | | | |
| Services | 7/22/2020 | 8/6/2020 | 1/22/2021 |
| Progressice Medical Management of | | | |
| Batesville, LLC d/b/a Panola Medical | | | |
| Center | 8/19/2020 | 9/3/2020 | 2/19/2021 |
| Mid-South Imaging Center, LLC | | | |
| Acquisition of MRI Equipment and | | | |
| Offering of MRI Services | 9/11/2020 | 9/26/2020 | 3/11/2021 |
| Baptist Memorial Hospital - DeSoto, Inc d/b/a Baptist Memorial Hospital - DeSoto | | | |
| Construction of a Medical Office Building | 9/11/2020 | 9/26/2020 | 3/11/2021 |
| Biloxi H.M.A., Inc. d/b/a Merit Health Biloxi | | | 3/15/21 |
| Offering of PCI Services in a Hospital | 0/45/2222 | 0 /00 /05 | |
| withiout On-Site Cardiac Surgery Baptist Memorial Hospital - Union | 9/15/2020 | 9/30/2020 | 4/2/24 |
| County, Inc. | 10/2/20 | 1 | 4/2/21 |
| The Offering of Positron Emission | | | |
| Tomography (PET) Services | | 10/17/2020 | |

Legend

Columns in Red = Deadlines set by statute or policy

Items in Bold and Italics = New information added since last Weekly Report.

| Facility/Service Type | Project Description | Date Application Received | Deadline for Notifying Applicant that Application is Deemed Complete/Add'Info is Needed (15 days from receipt of application) | Date Deemed Complete/ Incomplete Notice Sent | Date of Public Notice of Application into Review | Additional info Requested (Y/N) | Date Additional Info Received | Staff Analysis Oue Date (45 days from date application filed) | Staff Analysis Fublication State | Application Recommended for Approval/ Disapproval | Hearing Request Deadline (10 days from Stafi Analysis Publication Date) | Hearing Requested (Y/N) | Deadline for Add'i info on Negative Staff Analysts (15 days from Staff Analysis Publication Date) | Add'l Info Received on Negative Staff Analysis | Notice | Deadline to Issue Final Order (90 days from date application received OR 45 days from Hearing Officer Recommendation | Final Order Issued/ Effective Date | Chancery Court Appeal Filed (V/N) | Application Withdrawn (Y/N) & Date |
|-----------------------|--|---------------------------------|--|---|---|---------------------------------------|-------------------------------------|--|-------------------------------------|--|---|---|--|---|---|---|--|---|--|
| MRI | COM Review Humber 161.031-013-013 Memorial Hospital a Culifore Acquistion at Mobile NRI Linit a: Offering of Mobile MRI Send-ces Capital Expenditure: \$395,00.00 Location: Outport, Harrison County, Maskatippi | 10/8/18 | 10/23/18 | 10/23/18 | 10/23/18 | ٧ | 11/19/18 | 11/22/18 | 11/20/18 | Approval | 12/2/18 (Sunday) 12/3/18 (Monday) | Y | 12/8/18 | N/A | Hearing Scheduled Revised: 4/2/19 4/4/19 and 4/11/19-4/12/19 | Revised: 4/2/19 - | | | |
| Matgital | CON Review Number: HG-RHS-0170-002 Oscharer Medical Center-Hancock, LLC, qfe/a Oscharer Medical Center-Hancock Rein/Lialion of MHI Equipment and Services at Oscharer Health Center-Outpatient Imaging location: Bay St. Louis, Hancock County, Mississippi Capitual Expenditure: \$0.00 | 1/29/20 | 2/13/2020 | 2/13/20 | 2/13/20 | Ť | 2/28/20 | 3/14/2020 (Saturday) 3/16/2020 (Monday) | 3/16/2020 | Арргоved | 3/26/2020 | Y 3/20/20 Memorial Hospital at Gulfoorl | 3/31/2020 | | Hearing Scheduled for 9/14/20 to 9/16/20 Rescheduled to December 2020 Location: TBD | 4/28/2020 | | | |
| | CON Review: HG-CO-0820-005 South Central Regional Medical Center (SCRMC) Cost Owrrun to CON Review Number: HG-RC- 0616-011; #0915 (SCRMC) Expansion and Medical Office Building Project Original Approved Capital Expenditure: \$35,500,000 00 Additional Capital Expenditure: \$45,500,000 00 Revised Additional Amount: \$42,416,954,00 Revised Additional Amount: \$42,416,954,00 | 8/3/2020 | B/18/2020 | 8/17/2020 | 8/37/2010 | Y | | Allacono | 9/17/2020 | Approved | 9/27/2020 (Sunday) 9/28/2020 | | | | 10/5/20 | 11/1/2020 (Sunday) 11/2/2020 | | | |
| | CON Review: HG-58-0920-006 Progressive Medical Management of Batescille, LLC d/bd Panola Medical Center Provision of Swing Bards location: Batesville, Mississippi Capital Expenditure: \$6,500.00 | 9/4/20 | 9/19/20 (Saturday) 9/21/20 (Monday) | 9/16/20 incomplete Letter 9/28/20 Complete Letter | 9/28/20 | Ť | 9/24/20 & 9/25/20 10/19/20 | 9/17/2020 | 10/19/20 | Approved | (Monday) | | 10/2/2020 | | | (Manday) | | | |
| Wesseld | CON Review: HG-NIS-1,020-007 Billoui H.M.A., inc. d'a/a Merii Nealth Biloxi Officring of PCI services in a Houghtal withhout On-Site Cordiac Surgery (coation: Bilox, Harrison County, Mississippi Capital Expenditure: \$5,000.00 | so/zn/20 | Monday 11/12/2020 | | | | | Staff Analysis Due: 12/12/20 (Saturday) 12/14/20 (Manday) | | . 199-3460 | Official Date 12/24/2020 (Thursday) Change due to Holiday 12/28/2020 | | 12/29/20 | | | 12/3/20 | | | |

Emergency Request

| Date Received | Facility | Project | Contact | CON/Planning Staff Assigned | Date Complete |
|---------------|---|---|-------------------|--------------------------------|---------------|
| | - | Temporary Approval - Addition of Three (3) ESRD | | | |
| | | Stations | | | |
| | | Isolation/Seperation Facility for ESRD Patients affected by COVID-19 | | | |
| | | Capital Expenditure: \$50,000.00 (Chairs/Stations) | | | 1 |
| | | Location: Belzoni, Humphreys County, Mississippi | | | 1 |
| 3/19/2020 | RCG of Mississippi, Inc. d/b/a Fresenius Kidney Care Belzoni | | A111 | Cl. I al D. Marill | 0/00/202 |
| 3/19/2020 | Delzoni | Temporary Approval - Additon of Fourteen (14) | Allison Simpson | Christin B. Williams | 3/20/202 |
| | | ESRD Stations | | | |
| | | Isolation/Seperation Facility for ESRD Patients | | | |
| | | affected by COVID-19 Capital Expenditure: \$224,000,00 (Chairs/Stations) | | | |
| | | Location: Flowood, Rankin County, Mississippi | | | 1 |
| | Fresenius Medical Care Dogwood, LLC d/b/a | , | | | |
| 3/19/2020 | Fresenius Kidney Care Dogwood | | Allison Simpson | Christin B. Williams | 3/20/202 |
| | | Temporary Approval - Additon of Seven (7) ESRD Stations | | b | |
| | | Isolation/Seperation Facility for ESRD Patients | | | |
| | | affected by COVID-19 | i . | | |
| | | Capital Expenditure: \$112,000.00 (Chairs/Stations) | | | |
| 3/19/2020 | Renal Care Group Tupelo, LLC d/b/a RCG of Tupelo (Lee County Dialysis) | Location: Tupelo, Lee County, Mississippi | Adly no | OL LAL STANSIN | n (no (non |
| DITALOED | free consts orations | Temporary Lease of Additional Neds and Capacity | Allison Simpson | Christin B. Williams | 3/20/202 |
| | | to Provide Acute Care Inpatient Services at | | | |
| 7 (24 (222 | | Methodist Rehabilitation Center | | | |
| 3/31/2020 | University of Mississippi Medical Center | Patients affected by COVID-19 Temporary Approval - Addition of Four (4) ESRD | Mark Garriga | Christin B. Williams | 4/1/2020 |
| | | Stations | | | |
| | | Isolation/Seperation Facility for ESRD Patlents | | | |
| 4 (4 (4 4 | Davita Singing River Dialysis | affected by COVID-19 | Brant Ryan/ | | |
| 4/9/2020 | (Pascagoula, MS) | Location: Pascagoula, Mississippi Temporary Approval - Walver to Transfer Swing- | Chris Price | Christin B. Williams | 4/10/2020 |
| | | Beds and Provide Swing-Bed Services in an | | | |
| | | Alternate Setting for Patients affected by COVID- | | | |
| 4/21/2020 | Anderson Regional Medical Center | 19 | Dawn Campbell | Christin B. Williams | 4/22/2020 |
| | | Temporary Approval - Addtlon of Twenty-five (25) Adult Psychiatric Beds (pending Brentwood | | | |
| | | Behavioral Health's request for the return of all | | | |
| | | twenty-five adult psychiatric beds currently being | | | |
| | 0 | leased by Panola Medical Center d/b/a | | | |
| 4/21/2020 | Panola Medical Center d/b/a Crossroads Behavioral Health | Crossroads Behavioral Heal th)for Patients Affected by COVID-19 | Quentin Whitwell, | Christin B. Williams | 5/1/2020 |
| | | Temporary Approval - Addition of Six (6) ESRD | 10 | Christin B. Williams | 3/1/2020 |
| | | Station Request Separation Facility for ESRD | | | |
| | | Patients affected by COVID-19 | | | |
| | | Capital Expenditure: \$224,000.00 (Chairs/Stations) Location: Flowood, Rankin County, Mississippi | | | |
| | Fresenius Medical Care Dogwood, LLC d/b/a | | | | |
| 7/2/2020 | Fresenius Kidney Care Dogwood | | Allison Simpson | Christin B. Williams | 7/6/2020 |
| | | Temporary Approval - Fixed PET Unit and Services | | | |
| | | in Ocean Springs, MS at Singing River Patients affected by COVID-19 | | | |
| | | Location: Ocean Springs, Mississippi | | | |
| 7/16/2020 | Singing River Health System | | Brant Ryan | Christin B. Williams | 7/31/2020 |
| | | Temporary Approval - Outpatient dialysis services at North Mississippi Medical Center (NMMC) for | | | |
| | | patients affected by COVID-19 | | | |
| 3/12/2020 | North Mississippi Medical Center | Location: Tupelo, Lee County, Mississippi | Brant Ryan | Christin B. Williams | 8/14/2020 |
| | | Temporary Approval - MRI scanner and services at | | | |
| | | their imaging center for patients affected by COVID-19 | | | |
| 3/13/2020 | Ochsner Medical Center - Hancock | Location: Diamondhead, Mississippi | Brant Ryan | Christin B. Williams | 8/17/2020 |
| | | Temporary Approval for the Addition of Ten (10) | | | 5,2,,202,0 |
| | | Psychiatric Beds to Oceans Behavioral Hospital | | | |
| /17/2020 | Oceans Behavioral Hospital Biloxi, LLC | Biloxi to address the Covid-19 Pandemic | James T. Cox | Christin B. Williams | 9/21/2020 |
| 7_7-000 | OTTO DETINATION TO SPINAL DITON, CLC | | rantes I. COX | Smotin p. Williams | 9/21/2020 |

Note: Projects Remain on Report for 30 days after completion

Hearings

| Type of Hearing | Project Description | Hearing Request Deadline | Request Date | Hearing Requestor | Request Sent to Parties | Deadline to Schedule Hearing (60 days from Receipt of Request, Unless Both Parties Request Waiver) | Agreement to Walve Time Period for Review (Y/N) | Hearing Date and Location | CON Legal Notice Publication Deadline | CON Legal Notice Publication Date | Hearing Withdraw n (Y/N) & Date | Date Briefs Filed | Date Hearing Closed | Hearing Officer Decision Deadline (45 days from Date Hearing Closed) | Hearing Officer Recommendation and Date | Chancery Court Appeal Filed (Y/N) & Date | Court of Appeals/5. Ct. Appeal (Y/N) & Date |
|-----------------------------------|---|--------------------------------|--------------|--|----------------------------|---|---|--|--|--|---|-------------------------|---------------------------|--|---|---|---|
| During the Course of Review | CON Review Number:HG-NIS- 1018-013 Memorial Hospital at Gulfport Acquisition of Mobile MRI Unit & Offering of Mobile MRI Services Capital Expenditure: \$595,000,00 Location: Gulfport, Harrison County, Mississippi | 12/3/18 | | Singing River Health System Gilchrist Donnell PLLC Brant J. Ryan | 12/12/18 | 1/28/19 | Y | Hearing Scheduled Revised: 4/2/19 -4/4/19 and 4/26/19 Location: LeFleur's Square (Licensure & Certification) | | | | | | | | | |
| During the Course of Review | CON Review Number: HG-RHS-0120-002 Ochsner Medical Center- Hancock, LLC, d/b/a Ochsner Medical Center-Hancock Reinitiation of MRI Equipment and Services at Oschner Health Center-Outpatient Imaging Location: Bay St. Louis, Hancock County, Mississippi Capital Expenditure: \$0.00 | 3/20/2023 | | Memorial Hospital at Gulfport Allison Simpson | 3/23/2020 | 5/19/2020 | Y Received: 4/2/20 from Allison Simpson on behalf of Memorial Hospital Received: 4/10/20 from Jon Seawright on behalf of Ochsner- Hancock | Originally Scheduled October 14th - 16th, 2020 Location: TBD Postponed Rescheduled to December 8th - 10th, 2020 | | 10/19/20 | | | | | | | |

Six Month Extensions/Progress Reports (SME/Prog. Rep.)

As of Week Ending 10/30/20 Note: Projects remain on Report for 30 days after completion

| | | | | | | 30 days |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
| ASC | CON Review Number: ASC-NIS-1219-011 Mississippi Sports Medicine and Orthopaedic Center, PLLC d/b/a Mississippi Sports Medicine and Orthopaedic Center - Flowood Clinic Offering of MRI Services at Mississippi Sports Medicine and Orthopaedic Center(Flowood Clinic) Capital Expenditure: \$722,500.00 Capital Expenditure Made to Date: \$10,000.00 | 9/2/2020 | N | N/A | 10/2/20 | Granted |
| | CON Review Number: MOB-NIS-0419-005 CON Number: R-0959 Modern Vascular of Southaven, LLC Providing In-Office Invasive Digital Angiography Location: Southaven, DeSoto, Mississippi Capital Expenditure: \$1,040,605 Capital Expenditure Made to Date: \$1,015,182.00 | 9/4/2020 | N | Y | 10/5/2020 | Filed |

Legend

Columns in Red = Deadlines set by statute or policy

As of Week Ending 10/30/20 Note: Projects remain on Report for 30 days after completion

| | | | | | | Jouays |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
| Medical Center | CON Review Number: LTAC-BANK R-03 2-15-001 CON Number: R-0629 Panola Medical Center Mississippi LTAC Holdings, LLC Conversion of 25 Acute Care Beds to 25 Long Term Acute Care Beds Authorized Capital Expenditure: \$416,000.00 Capital Expenditure Made to Date: \$0.00 | 9/18/20 | Y | Y | 10/15/20 | Granted |
| | CON Review: NH-A-0119-001 CON Number: R-0953-A (Amendment to: CON R-0786 CON Review: NH-CRF-0908-039) Community Place Nursing Home Construction/Replacement/Relocation of Community Place Nursing Home from Hinds County to Rankin County Authorized Capital Expenditure: \$8,375,502.00 Capital Expenditure Made to Date: \$6,652,592.20 | 9/22/2020 | N | N/A | 10/2/20 | Granted |

Legend

Columns in Red = Deadlines set by statute or policy

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| ASC | CON Review Number: ASC-NIS-0819-010 CON Number: R-0960 Capital Orthopaedic Clinic, PLLC Offering of MRI Services and Acquisition of MRI Equipment Capital Expenditure: \$1,460,800.00 Capital Expenditure Made to Date: \$0.00 Location: Flowood, Rankin County, Mississippi | 9/29/2020 | N | N/A | 10/29/2020 | Granted |
| Hospital | CON Review Number: HR-RB-0819-009 Encompass Health Rehabilitation Hospital of Gulfport, LLC d/b/a Encompass Health Rehabilitation Hospital, a partner of Memorial Hospital of Gulfport Expansion and Renovation Project for Encompass Health Rehabilitation Hospital of Gulfport, LLC Capital Expenditure: \$5,822,056.00 Capital Expenditure Made to Date: \$4,754,554.00 Location: Gulfport, Harrison County, Mississippi | 9/29/2020 | N | N/A | 10/29/2020 | Granted |

Legend

Columns in Red = Deadlines set by statute or policy

Six Month Extensions/Progress Reports (SME/Prog. Rep.)

As of Week Ending 10/30/20 Note: Projects remain on Report for 30 days after completion

| | | | | | | 30 days a |
|--------------------------|--|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
| Hospital | CON Review Number: HG-CB-BANK R-04 | 10/6/2020 | | | | |
| | 2015-002 | | | | | |
| | CON Number: R-0419 | | | | | |
| | Mississippi Alzheimer's Holdings, LLC | | | | | |
| | Establishment of a 20-Bed Alzheimer's | | | | | |
| | Dementia Special Care Unit | | | | | |
| | Authorized Capital Expenditure: \$0.00 | | | | | |
| | Captial Expenditure Made to Date: \$0.00 | | | | | |
| MRI Facility | CON Review Number: FS-NIS-0216-002 | 10/12/2020 | | | | |
| | CON Number: R-0924 | | | | | |
| | Oxford Pre-Op & Imaging Center | | l l | | | |
| | Acquisition or Otherwse Control of MRI | | | | | |
| | Equipment and Offering of MRI Services | | | | | |
| | Authorized Capital Expenditure: | | | | | |
| | \$1,935,457.00 | | | | | |
| | Capital Expenditure Made to Date: | | | | | |
| | \$312,500.00 | | | | | |

Legend

Columns in Red = Deadlines set by statute or policy

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied, Project Closed |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| ESRD | CON Review ESRD-ES-0817-11 CON Number: R-0932 Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Medical Care - South Mississippi Kidney Center - Orange Grove Espansion of Stations at Existing ESRD Facility Authorized Capital Expenditrue: \$2,273,159.89 Capital Expenditure Made to Date: \$144,000.00 | 10/16/20 | | | | |
| FSF | CON Review Number: FSF-NIS-0129-001 Vascular and Vein Institute of the South, PLLC Offering of Digital Angiography (DA) Services in a Freestanding Facility, Senatobia, Mississippi Location: Senatobia, Tate County, Mississippi | 10/26/2020 | | | | |

Legend

Columns in Red = Deadlines set by statute or policy

Six Month Extensions/Progress Reports (SME/Prog. Rep.)

As of Week Ending 10/30/20 Note: Projects remain on Report for 30 days after completion

| | | | | | | 30 days all |
|--------------------------|--|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
| ESRD Facility | CON Review Number: ESRD-NIS-0618-008 | 10/29/20 | | | | |
| | Fresenius Medical Care East McComb | | | | | |
| | Dialysis, LLC | | | | | |
| | Establishment of Satellite ESRD Facility | | | | | |
| | Location: McComb, Pike County, Mississippi | | | | | |
| | Authorized Capital Expenditure: | | | | | |
| | \$4,010,432.35 | | | | | |
| | Capital Expendenditure Made to Date: | | | | | |
| | \$3,313,719.00 | | | | | |
| | CON Review Number: ESRD-NIS-0918-010 | 10/30/20 | | | | |
| | Fresenius Medical Care Dogwood, LLC d/b/a | | | | | |
| | Fresenius Kidney Care Dogwood | | | | | |
| | Establishment of Satellie ESRD Facility | | | | | |
| | Flowood, Rankin County, Mississippi | | | | | |
| | Authorized Capital Expenditure: | | | | | |
| | \$3,865,678.62 | | | | | |
| | Capital Expenditure Made to Date: | | | | | |
| | \$3,506,096.00 | | | | | |

Legend

Columns in Red = Deadlines set by statute or policy

Change of Ownership (CHOW) Applications

As of Week Ending 10/30/20 Note: Projects remain on Report for 30 days after completion

| Facility/Service Type | Project Description | Date Received | Deadline to Complete (30 days from Receipt of Application) | Date Notice Sent to DOM | Date Letter Received from DOM | Additional Info Requested | Additional Info Received | Application Approved/Rejected/ Returned/Withdrawn |
|--------------------------|--|------------------|--|----------------------------|-------------------------------------|---------------------------------|-----------------------------|---|
| Surgery Center | Mississippi Sports Medicine and Orthopaedic Center, PPLC Magnetic Resonance Imaging Equipment and Services | 9/17/20 | 10/17/2020 (Saturday) 10/19/2020 (Monday) | 9/22/2020 | N/A | N | 10/16/20 | 10/19/20 |
| Hospital | Biloxi H.M.A., LLC d/b/a Merit Health Biloxi | 10/13/20 | 11/12/2020 | N/A | 10/16/2020 | N | 10/15/20 | |
| Home Health Agency | WAYS, LLC d/b/a Sunflower Home Health | 10/30/2020 | 11/29/2020 (Sunday) 11/30/2020 (Monday) | | | | | |