## Determination of Reviewability

<table>
<thead>
<tr>
<th>Facility/Service Type</th>
<th>Project Description</th>
<th>Date Application Received</th>
<th>Deadline to Notify Applicant 5 business days After Receipt of Request</th>
<th>Date Notification to Applicant Sent</th>
<th>Statutory Deadline to Complete 45 days from Receipt of Application</th>
<th>Additional Info Requested (Y/N)</th>
<th>Date Additional Info Received</th>
<th>Date DR Completed &amp; Mailed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Specialty Ambulatory Surgery Center</td>
<td>InSight Health Corp Addition of Clinical Facility</td>
<td>10/18/17</td>
<td>10/24/17</td>
<td>10/24/17</td>
<td>12/2/17</td>
<td>Y</td>
<td>11/10/17</td>
<td>11/14/17</td>
</tr>
<tr>
<td>ESRD</td>
<td>Renex Dialysis Facilities, Inc. d/b/a Fresenius Medical Care Port Gibson Relocation of ESRD Facility Within One Mile and Allowed Expansion of Stations at ESRD Facility</td>
<td>10/24/17</td>
<td>10/30/17</td>
<td>10/30/17</td>
<td>12/8/17</td>
<td>N</td>
<td>N/A</td>
<td>11/27/17</td>
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<tr>
<td>Medical Center</td>
<td>Garden Park Medical Center Geriatric Psychiatric Distinct Part Unit</td>
<td>10/31/17</td>
<td>N</td>
<td>N/A</td>
<td>12/15/17</td>
<td>N</td>
<td>N/A</td>
<td>12/15/17</td>
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<tr>
<td>Single Specialty Ambulatory Surgery Center</td>
<td>Columbus Orthopaedic Outpatient Center, LLC Addition of Doctor</td>
<td>11/3/17</td>
<td>11/8/17</td>
<td>11/8/17</td>
<td>12/18/17</td>
<td>N</td>
<td>N/A</td>
<td>12/18/17</td>
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<tr>
<td>Imaging Center</td>
<td>Medical Imaging Center, LLC</td>
<td>11/13/17</td>
<td>11/17/17</td>
<td>11/14/17</td>
<td>12/28/17</td>
<td>N</td>
<td>N/A</td>
<td>12/28/17</td>
</tr>
<tr>
<td>ESRD</td>
<td>Fresenius Medical care - Mid Mississippi Expansion of Existing Satellite ESRD Facility</td>
<td>11/29/17</td>
<td>12/4/17</td>
<td>12/4/17</td>
<td>1/13/18</td>
<td>N</td>
<td>N/A</td>
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<tr>
<td>Hospital</td>
<td>University of Mississippi Medical Center - Children's Hospital Expansion</td>
<td>12/11/17</td>
<td>12/16/17</td>
<td>12/15/17</td>
<td>1/25/18</td>
<td>N</td>
<td>N/A</td>
<td>12/22/17</td>
</tr>
<tr>
<td>ESRD</td>
<td>RCG Mississippi, Inc. d/b/a RCG of Belzoni Relocation of ESRD Facility within One Mile and Allowed Expansion of Stations at ESRD Facility</td>
<td>12/14/17</td>
<td>12/19/17</td>
<td>12/19/17</td>
<td>1/28/18</td>
<td>N</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

**Legend**
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# Notice of Intent (NOI) to Apply for a CON

<table>
<thead>
<tr>
<th>Project Name and Description</th>
<th>Date Received</th>
<th>Earliest Date CON Application May Be Filed (15 days from date NOI Received)</th>
<th>Date NOI Expires (6 months from date NOI Received)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Renal Care Group Tupelo, LLC d/b/a Renal Care Group Oxford Relocation within One Mile and Expansion of ESRD Facility</td>
<td>7/31/17</td>
<td>8/15/17</td>
<td>1/31/18</td>
</tr>
<tr>
<td>Forrest County General Hospital Linear Accelerator Addition</td>
<td>8/3/17</td>
<td>8/18/17</td>
<td>2/3/18</td>
</tr>
<tr>
<td>Forrest County General Hospital Electrophysiology Laboratory Construction</td>
<td>8/3/17</td>
<td>8/18/17</td>
<td>2/3/18</td>
</tr>
<tr>
<td>Memorial Hospital at Gulfport Cost Overrun on Patient Tower Expansion and Renovation</td>
<td>9/14/17</td>
<td>9/29/17</td>
<td>3/14/18</td>
</tr>
<tr>
<td>Alliance Health Center, Inc. d/b/a Alliance Health Center Conversion for Expansion of Psychiatric Beds</td>
<td>10/9/17</td>
<td>10/24/17</td>
<td>4/9/18</td>
</tr>
<tr>
<td>Calvary Pediatric Facilities Pediatric Skilled Nursing Facility</td>
<td>10/30/17</td>
<td>11/14/17</td>
<td>4/30/18</td>
</tr>
<tr>
<td>Singing River Health System Conversion of Eight (8) level II CMR Beds</td>
<td>11/1/17</td>
<td>11/16/17</td>
<td>5/1/18</td>
</tr>
<tr>
<td>Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Medical Care Dialysis Services of Rankin County - Brandon Expansion of ESRD Stations</td>
<td>11/13/17</td>
<td>11/28/17</td>
<td>5/13/18</td>
</tr>
<tr>
<td>Renal Care Group Tupelo, LLC d/b/a RCG Central New Albany Expansion of Stations at Existing ESRD Facility</td>
<td>11/13/17</td>
<td>11/28/17</td>
<td>5/13/18</td>
</tr>
</tbody>
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| Facility/Service Type | Project Description | Deadline for Notifying Applicant that Application is Deemed Complete/Additional Info Received (35 Days from receipt of application) | Date Developed Complete/Incomplete Notice Sent | Date of Public Notice of Application into Review | Additional Info (Y/N) | Date Additional Info Received | Staff Analysis Due Date (45 Days from date applications filed) | Staff Analysis Publication Date | Application Recommended for Approval/Disapproval | Hearing Request Deadline (30 Days from Staff Analysis Publication Date) | Hearing Requested (Y/N) | Deadline for ADF Info on Negative Staff Analysis (55 Days from Staff Analysis Publication Date) | ADF Info Received on Negative Staff Analysis | Date Final Order Published | Deadline to Issue Final Order (30 Days from date application received or 45 Days from hearing Office recommendation) | Final Order Issued/Effective Date | Change in Appeal (Y/N) & Date | Application Withdrawn (Y/N) & Date |
|-----------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------|----------------------|-----------------------------|-----------------------------------------------|--------------------------------|---------------------------------|---------------------------------|----------------|------------------------------------------------|-----------------------------|----------------|-------------------------------------------------|-----------------------------|-----------------------------|
| PA MRI Facility | CON Review Number: 15-MIS-0216-002 Oxford Pre-op & Imaging Center, LLC (a/k/a Oxford Pre-op & Imaging Center Acquisition or Otherwise Control of Magnetic Resonance Imaging (MRI) and Offering of MRI Services Capital Expenditure: $1,939,637.00 Location: Oxford, Lafayette County, Mississippi | 2/26/16 Y/A 2/27/16 Deemed Complete 4/1/16 N/A N/A 5/16/16 Approval 6/6/16 Y N/A N/A 4/1/17 4/27/17 4/10/17 Y | | | | | | | | | | | | | | | | | | |
| Civic | CON Review Number: C-MIS-0813-005 Wound Care Management, LLC (a/k/a MedCenters Provision of digital subtraction angiography (DSA) Services) Capital Expenditure: $517,483.00 Location: Wicksburg, Warren County, Mississippi | 5/27/16 4/2/16 7/2/16 Deemed Complete 7/2/16 N/A N/A 7/12/16 8/12/16 Approval 9/25/16 Y 9/30/16 N/A 9/18/16 9/26/16 Revised 9/26/17 9/18/17 Y | | | | | | | | | | | | | | | | | | |
| Multi Specialty Ambulatory Surgery Center | CON Review Number: ASC-MIS-0814-019 Columbus Orthopaedic Outpatient Center, LLC Expansion of an Existing Single Specialty Ambulatory Surgery Center in a Multi Specialty ASC Capital Expenditure: $835,961.77 Location: Columbus, Lowndes County, Mississippi | 8/21/16 9/3/16 9/7/16 Deemed Complete 9/7/16 N/A 9/26/16 10/1/16 10/27/16 Approval 10/27/16 Y 10/22/16 N/A 11/21/16 | | | | | | | | | | | | | | | | | | |
| EMD Facility | CON Review Number: EMD-ES-0817-001 Bi-Medical Applications of Mississippi, Inc. (a/k/a Freeman Medical Care Jackson Expansion of Stations at Existing EMD Facility Capital Expenditure: $2,273,159.89 Location: Gipson, Harrison County, Mississippi | 8/27/17 9/2/17 (Saturday) 9/3/17 (Tuesday after Labor Day) 9/3/17 Deemed Complete 9/3/17 N/A 10/2/17 10/2/17 Approval 10/12/17 N 10/17/17 N/A 10/17/17 11/36/17 11/17/17 R | | | | | | | | | | | | | | | | | | |
| EMD Facility | CON Review Number: EMD-ES-0817-011 Bi-Medical Applications of Mississippi, Inc. (a/k/a Freeman Medical Care Jackson Expansion of Stations at Existing EMD Facility Capital Expenditure: $27,490.00 Location: Jackson, Hinds County, Mississippi | 9/12/17 9/10/17 (Saturday) 10/5/17 (Monday) 9/12/17 Deemed Complete 9/12/17 N/A 10/20/17 10/20/17 Approval 11/9/17 N 11/14/17 N/A 11/17/17 12/14/17 12/14/17 | | | | | | | | | | | | | | | | | | |
| Mobile MRI Services | CON Review Number: HIS-MIS-0817-003 Baptist Medical Center, LLC (a/k/a BHC-Wade Establishment of Mobile MRI Services Capital Expenditure: $21,360.00 Location: Kosciusko, Attala County, Mississippi | 5/24/17 10/24/17 (Saturday) 10/25/17 Revised 10/16/17 Y 11/32/17 11/32/17 11/12/17 Approval 11/20/17 Y 11/28/17 N/A 12/28/17 Revised | | | | | | | | | | | | | | | | | | |

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| Facility/Service Type | Project Description | Date Application Received | Deadline for Notifying Applicant that Application is Deemed Complete/Incomplete Notice Sent | Date Deemed Complete/Incomplete Notice of Application | Date of Public Notice of Application Issued | Additional Info Requested (Y/N) | Date Additional Info Received | Staff Analysis Due Date (45 days from date application filed) | Staff Analysis Publication Date | Application Recommended for Approval/Disapproval | Hearing Request Deadline (30 days from Staff Analysis Publication Date) | Hearing Requested (Y/N) | Deadline for Add'l Info on Negative Staff Analysis (15 days from Staff Analysis Publication Date) | Add'l Info Received on Negative Staff Analysis | Date Final Order Published | Final Order Issued/Effective Date | Charitable Court Approval Filed (Y/N) | Charitable Withdrawal (Y/N) | Application Withdrawal Date |
|----------------------|---------------------|--------------------------|------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------|-----------------------------|-----------------------------------|---------------------------------|-----------------------------------------------|-------------------------------|--------------------------|-----------------------------------------------|-------------------------------|---------------------------------|-------------------------------|--------------------------|-----------------------------|

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<table>
<thead>
<tr>
<th>Type of Hearing</th>
<th>Project Description</th>
<th>Hearing Request Deadline</th>
<th>Date Hearing Requested</th>
<th>Hearing Requestor</th>
<th>Date Notice of Hearing Request Sent to Parties</th>
<th>Deadline to Schedule Hearing</th>
<th>Agreement to Waive Time Period for Review</th>
<th>Hearing Date and Location</th>
<th>CON Legal Notice Publication Date</th>
<th>CON Legal Notice Publication Deadline</th>
<th>Hearing Withdrawn (Y/N) &amp; Date</th>
<th>Date Briefs Filed</th>
<th>Date Hearing Closed</th>
<th>Hearing Officer Decision Deadline (45 Days from Date Hearing Closed)</th>
<th>Hearing Officer Recommendation and Date</th>
<th>Chancery Court Appeal Filed (Y/N) &amp; Date</th>
<th>Court of Appeals/S.C. Ct. Appeal (Y/N) &amp; Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: FS-NIS-0216-002 Oxford Pre-op &amp; Imaging Center, LLC 6/6/1a Oxford Pre-op &amp; Imaging Center Acquisition or Otherwise Control of Magnetic Resonance Imaging (MRI) and Offering of MRI Services Capital Expenditure: $1,915,457.00 Location: Oxford, Lafayette County, Mississippi</td>
<td>6/6/16</td>
<td>6/3/16</td>
<td>Requestor(s): Baptist Hospital North Mississippi, Inc. d/b/a Baptist Memorial Hospital North Mississippi BMHI North Mississippi Imaging Services, LLC d/b/a Oxford Diagnostic Center</td>
<td>8/2/16</td>
<td>Y</td>
<td>10/24/16 through 10/26/16</td>
<td>Licensure</td>
<td></td>
<td></td>
<td>N</td>
<td>1/27/17</td>
<td>2/27/17</td>
<td>3/10/17</td>
<td>Recommended Approval 3/13/17</td>
<td>Y</td>
<td>4/26/17</td>
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<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: C-NIS-0516-010 Wound Care Management, LLC d/b/a MedCareCenters Provision of Digital Subtraction Angiography (DSA) Services (Limb Salvage Program) Capital Expenditure: $317,467.00 Location: Vicksburg, Warren County, Mississippi</td>
<td>8/25/16</td>
<td>8/26/16</td>
<td>Vicksburg Healthcare, LLC d/b/a Meri Health River Region</td>
<td>8/30/16</td>
<td>10/23/16</td>
<td>Y</td>
<td>2/2/17 through 3/7/17</td>
<td>Licensure</td>
<td></td>
<td>N</td>
<td>6/30/17</td>
<td>6/30/17</td>
<td>8/14/17</td>
<td>Recommended Approval 8/14/17</td>
<td>Y</td>
<td>10/11/17</td>
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<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: ASC-NIS-0816-015 Columbus Orthopaedic Outpatient Center, LLC Conversion of an Existing Single-Specialty Ambulatory Surgery Center to a Multi-Specialty ASC Capital Expenditure: $855,963.77 Location: Columbus, Lowndes County, Mississippi</td>
<td>10/17/16</td>
<td>10/17/16</td>
<td>OCH Regional Medical Center (Betty Toon Gillins, Wise Carter) Baptist Memorial Hospital Golden Triangle, Inc. d/b/a Baptist Memorial Golden Triangle (Barry Cockrell, Baker Donelson)</td>
<td>10/28/16</td>
<td>12/16/16</td>
<td>Y</td>
<td>2/14/17 through 2/18/17</td>
<td>Underwood</td>
<td></td>
<td>2/4/17</td>
<td>1/25/17</td>
<td>2/10/17</td>
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<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: HG-NIS-0917-013 Baptist Medical Center Attala, LLC d/b/a BMC-Attala Establishment of Mobile MRI Services Capital Expenditure: $1,250.00 Location: Kosciusko, Attala County, Mississippi</td>
<td>11/23/17</td>
<td>11/20/17</td>
<td>Premier Medical Group of Mississippi, LLC d/b/a Kosciusko Medical Group</td>
<td>11/24/17</td>
<td>1/27/17</td>
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### Six Month Extensions/Progress Reports (SME/Prog. Rep.)

<table>
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<tr>
<th>Facility/Service Type</th>
<th>Project Description</th>
<th>Date Received</th>
<th>Additional Info Requested</th>
<th>Additional Info Received</th>
<th>Date Completed</th>
<th>Granted/Denied/Project Closed</th>
</tr>
</thead>
</table>
| Hospital              | CON Review Number: HG-R-0415-007  
CON Number: R-0895  
PCH-Cleveland, Inc. d/b/a Bolivar Medical Center  
Cosmetic Upgrades and Renovations for  
Bolivar Medical Center  
Authorized Capital Expenditure:  
$4,381,308.00  
Capital Expenditure Made to Date:  
$4,381,308.00 | 8/1/16 | Y | 4/6/17 |                 |                 |
| Nursing Home          | CON Review Number: NH-CRF-0512-011  
CON Number: R-0884  
Hinds County Nursing & Rehabilitation Center, LLC  
Construction/Relocation and Replacement of  
119 Nursing Home Beds/Services  
Authorized Capital Expenditure: | 2/15/17 | | | | |
| Hospital              | CON Review Number: HG-SB-0312-008  
CON Number: R-0857  
South Sunflower County Hospital  
Renovation/Cost Overrun Project  
Authorized Capital Expenditure:  
$9,479,670.00  
Capital Expenditure Made to Date:  
$8,097,485.31 | 3/28/17 | | | | |
| Hospital              | CON Review Number: HG-C-0613-010  
CON Number: R-0870  
Mississippi Methodist Hospital and  
Rehabilitation Center, Inc. d/b/a Methodist  
Outpatient Rehabilitation Center  
Construction of Consolidated Outpatient  
Therapy Facility  
Authorized Capital Expenditure:  
$5,872,945.00  
Capital Expenditure Made to Date:  
TBS | 8/25/17 | Y | 9/14/17 | | |

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<th>Granted/Denied/Project Closed</th>
</tr>
</thead>
</table>
| LTAC                  | CDON Review Number: LTAC-BANK R-03 2015-001  
Mississippi LTAC Holdings, LLC  
Conversion of 35 Acute Care Beds to 25 Long-Term Care Beds  
Authorized Capital Expenditure: $416,000.00  
Capital Expenditure Made to Date: $0.00 | 9/14/17 | N | N/A | | |
| Nursing Home          | CDON Review NF-CRF-0512-0211; CON Number: R-0884  
Hinds County Nursing & Rehabilitation Center, LLC  
Construction/Relocation and Replacement of 119 Nursing Home Beds/Services  
Authorized Capital Expenditure: $11,449,285  
Capital Expenditure Made to Date: $8,163,692.71 | 9/19/17 | N | N/A | | |
| Hospital              | CDON Review Number: HG-SB-0312-008  
South Sunflower County Hospital Renovation/Cost Overrun Project  
Authorized Capital Expenditure: $9,479,670.00  
Capital Expenditure Made to Date: $9,249,482.38 | 9/26/17 | N | N/A | | |
| Hospital              | CDON Review Number: NH-A-0816-018  
George Regional Hospital (d/b/a George Regional Health & Rehab)  
Establishment/Construction of a 60-Bed Skilled Nursing Facility  
Authorized Capital Expenditure: $676,585  
Capital Expenditure Made to Date: $672,050 | 10/9/17 | | | | |

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As of Week Ending 12/29/17  
Note: Projects remain on Report for 30 days after completion

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<tr>
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</table>
| Hospital              | CON Review Number: HG-RC-0611-012  
CON Number: R-0838  
Memorial Hospital at Gulfport  
Patient Tower Expansion and Renovation  
Authorized Capital Expenditure: $58,785,711  
Capital Expenditure Made to Date: $59,380,387.09 | 10/17/17       |                            |                          |               |                                |
| ESRD                  | CON Review Number: ESRD-NIS-0915-017  
CON Number: R-0908  
Fresenius Medical Care - Mid Mississippi  
Establishment of Satellite ESRD Facility  
Authorized Capital Expenditure: $4,688,732.00  
Capital Expenditure Made to Date: $3,341,449.99 | 10/26/17       |                            |                          |               |                                |
| Hospital              | CON Review Number: HG-NIS-0816-015  
CON Number: R-0920  
Choctaw Regional Medical Center  
Mobile Magnetic Resonance Imaging (MRI) Project  
Authorized Capital Expenditure: $0.00  
Capital Expenditure Made to Date: $0.00 | 10/30/17       | N                         | N/A                      | 12/27/17      | Closed                         |
| Hospital              | CON Review Number: HG-CRF-0612-015  
CON Number: R-0860  
Baptist Memorial Hospital - North Mississippi  
Construction/Relocation and Replacement of 217 Bed Hospital/Services  
Authorized Capital Expenditure: $313,508,083.00  
Capital Expenditure Made to Date: | 10/30/17       |                            |                          |               |                                |
| Hospital              | CON Review Number: HG-CB-0909-023  
CON Number: R-0817  
Methodist Healthcare - Olive Branch Hospital  
Construction of a 100 Bed Acute Care Hospital, MRI, Therapeutic Cardiac Catherization, Open Heart Surgery Equipment and Services and Obstetrics  
Authorized Capital Expenditure Made to Date: $97,135,596.00 | 11/15/17       |                            |                          |               |                                |

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| Hospital              | CON Review HG-RC-0314-003  
CON Number: R-0882  
Baptist Memorial Hospital - Golden Triangle, Inc.  
Pharmacy Relocation and Surgical Suite Expansion  
Capital Expenditure: $8,966,311  
Capital Expenditure Made to Date: $6,667,456 | 11/17/17 |              |                          |               |                             |
| Medical Office Building | CON Review Number: MOB-C-0316-005  
CON Number: R-0911  
Methodist Le Bonheur Healthcare  
Construction of Medical Office Building  
Capital Expenditure: $6,568,860.00  
Capital Expenditure Made to Date: $0.00 | 11/20/17 |              |                          |               |                             |
| ESRD                  | CON Review Number: ESRD-NIS-0316-006  
CON Number R-0912  
RCG Mississippi, Inc. d/b/a RCG Philadelphia d/b/a Neshoba County Dialysis  
Establishment of Satellite ESRD Facility  
Capital Expenditure: $4,114,560.85  
Capital Expenditure Made to Date: $3,634,531 | 11/30/17 |              |                          |               |                             |
| ESRD                  | CON Review Number: ESRD-NIS-0316  
CON Number: R-0910  
RCG Mississippi, Inc. d/b/a RCG of Meridian d/b/a Lauderdale County Dialysis  
Establishment of Satellite ESRD Facility  
Capital Expenditure: $3,717,886.96  
Capital Expenditure Made to Date: $3,740,082 | 11/30/17 | N            | N/A                      | 12/13/17     | Closed                      |
| Hospital              | CON Review Number: HG-RC-0316-003  
CON Number: R-0909  
Baptist Memorial Hospital - DeSoto, Inc.  
Emergency Department Addition  
Capital Expenditure: $15,204,530  
Capital Expenditure Made to Date: $3,032,124.54 | 11/30/17 | N            | N/A                      | 12/13/17     | Closed                      |

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| Healthcare Facility   | CDN Review Number: C-NIS-0317-004  
CON Review: R-0926  
Cardiovascular Institute of the South  
Establishment of Cardiac Only Positron Emission Tomography (PET) Services and Acquisition of Related Equipment  
Capital Expenditure: $12,750.00  
Capital Expenditure Made to Date: $0.00                                                                                                                                                                                                                                                                                                                                                     | 12/15/17      | N                         | N/A                      | 12/18/17       | Filed                                                                 |
| Hospital              | CDN Review Number: HG-C9-0909-023  
CON Number: R-0817  
Methodist Healthcare -Olive Branch Hospital  
Construction of a 100-Bed Acute Care Hospital, MRI, Therapeutic Cardiac Catheterization, Open Heart Surgery Equipment and Services and Obstetrics  
Capital Expenditure Authorized: $137,080,000.00  
Capital Expenditure Made to Date: $97,752,92.00                                                                                                                                                                                                                                                                                       | 12/20/17      |                                          |                           |                |                                                                            |
| Hospital              | CDN Review Number: HG-CFSF-0314-004  
CON Number: R-0875  
Forrest County General Hospital d/b/a Asbury Hospice House, Hattiesburg  
Construction of Hospice Facility  
Authorized Capital Expenditure: $6,449,306.00  
Capital Expenditure Made to date: $6,449,306.00                                                                                                                                                                                                                                                                                      | 12/22/17      |                                          |                           |                |                                                                            |
## Change of Ownership (CHOW) Applications

As of Week Ending 12/29/17

Note: Projects remain on Report for 30 days after completion

<table>
<thead>
<tr>
<th>Facility/Service Type</th>
<th>Project Description</th>
<th>Date Received</th>
<th>Deadline to Complete (30 days from Receipt of Application)</th>
<th>Date Notice Sent to DOM</th>
<th>Date Letter Received from DOM</th>
<th>Additional Info Requested</th>
<th>Additional Info Received</th>
<th>Application Approved/Rejected/Returned/Withdrawn</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rehabilitation Facility</td>
<td>Shady Lawn Health and Rehabilitation</td>
<td>11/1/2017</td>
<td>12/1/2017</td>
<td>11/2/2017</td>
<td>11/29/2017</td>
<td>N</td>
<td>N/A</td>
<td>Approved 12/1/17</td>
</tr>
<tr>
<td>Hospital</td>
<td>Memorial Hospital at Gulfport Behavioral Health Campus, Assets and Services</td>
<td>11/30/2017</td>
<td>12/30/2017</td>
<td>12/7/2017</td>
<td>12/11/2017</td>
<td>N</td>
<td>N/A</td>
<td>Approved 12/20/2017</td>
</tr>
</tbody>
</table>

**Legend**

Columns in Red = Deadlines set by statute or policy

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