## Determination of Reviewability

<table>
<thead>
<tr>
<th>Facility/Service Type</th>
<th>Project Description</th>
<th>Date Application Received</th>
<th>Date 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>Hospital</td>
<td>Merit Health Wesley Wesley Health System, LC d/b/a Merit Health Wesley Expansion of geriatric Psychiatry Distinct Part Unit</td>
<td>2/14/19</td>
<td>2/20/19</td>
<td>2/19/19</td>
<td>3/31/19 (Sunday) 4/1/19 (Monday)</td>
<td>N</td>
<td>N/A</td>
<td>3/15/19</td>
</tr>
<tr>
<td>MRI</td>
<td>Superior MRI Services, Inc. Acquisition of third mobile MRI unit and route</td>
<td>4/3/19</td>
<td>4/8/19</td>
<td>4/4/19</td>
<td>5/18/19 (Saturday) 5/20/19 (Monday)</td>
<td></td>
<td>4/9/2019</td>
<td></td>
</tr>
<tr>
<td>ESRD</td>
<td>West Hattiesburg Clinic Dialysis, Addition of Eight (8) Hemodialysis Stations at Existing ESRD Facility</td>
<td>4/8/19</td>
<td>4/15/19</td>
<td>5/23/19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ESRD</td>
<td>Pachuta Dialysis Unit Addition of Five (5) Hemodialysis Stations at Existing ESRD Facility</td>
<td>4/8/19</td>
<td>4/15/19</td>
<td>5/23/19</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Physician Clinic</td>
<td>Fusion Vascular and Cardiovascular Solutions of Central Mississippi Offering of Non-Digital Angiography Services</td>
<td>4/11/19</td>
<td>4/19/2019</td>
<td>5/26/19 (Sunday) 5/27/19 (Monday)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Legend**

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As of Week Ending 4/12/19
Note: Projects remain on Report for 30 days after completion.
### 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>University of Mississippi Medical Center - Grenada</td>
<td>2/20/2019</td>
<td>3/7/19</td>
<td>8/20/19</td>
</tr>
<tr>
<td>Offering of Swing Bed Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Forrest County General Hospital</td>
<td>2/21/19</td>
<td>3/8/19</td>
<td>8/21/19</td>
</tr>
<tr>
<td>Addition to Existing CMR Bed Licenses</td>
<td></td>
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</tr>
<tr>
<td>University of Mississippi Medical Center - Grenada</td>
<td>3/14/2019</td>
<td>3/29/19</td>
<td>9/14/19</td>
</tr>
<tr>
<td>Offering of Swing Bed Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modern Vascular of Southaven, LLC</td>
<td>3/15/2019</td>
<td>3/30/19</td>
<td>9/15/19</td>
</tr>
<tr>
<td>in-office Invasive Digital Angiography Services to Southaven, MS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alliance Health Center, Inc. d/b/a Alliance Health Center</td>
<td>3/25/2019</td>
<td>4/9/19</td>
<td>9/25/19</td>
</tr>
<tr>
<td>Conversion for Expansion of Psychiatric Beds</td>
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<td></td>
</tr>
<tr>
<td>Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius</td>
<td>4/5/2019</td>
<td>4/20/19</td>
<td>10/5/19</td>
</tr>
<tr>
<td>Kidney Care - North Jackson Establishment of a Satellite Facility</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Facility/Service Type</th>
<th>Project Description</th>
<th>Filing Date</th>
<th>Application Number</th>
<th>Project Approval Recommended?</th>
<th>Application Dismissed?</th>
<th>Application Withdrawn?</th>
<th>Project Status</th>
<th>Filing Date</th>
<th>Approval Date</th>
<th>Approval Y/N</th>
<th>Application Type</th>
<th>Application Withdrawn?</th>
<th>Application Filing Date</th>
<th>Application Withdrawn Date?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1011</td>
<td>1822</td>
<td>3/1/18</td>
<td>3/1/18</td>
<td>N</td>
<td>Y</td>
<td>4/21/18</td>
<td>N</td>
<td>4/21/18</td>
<td>N/A</td>
<td>N/A</td>
<td>Y</td>
<td>N/A</td>
<td>4/21/18</td>
<td>4/21/18</td>
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<tr>
<td>1012</td>
<td>1824</td>
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<td>N</td>
<td>4/21/18</td>
<td>N</td>
<td>4/21/18</td>
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<td>N</td>
<td>N/A</td>
<td>4/21/18</td>
<td>4/21/18</td>
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<tr>
<td>1013</td>
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<td>3/1/18</td>
<td>3/1/18</td>
<td>N</td>
<td>N</td>
<td>4/21/18</td>
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<td>4/21/18</td>
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<tr>
<td>1014</td>
<td>1826</td>
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<td>N</td>
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<td>4/21/18</td>
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<tr>
<td>1015</td>
<td>1827</td>
<td>3/1/18</td>
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<td>N</td>
<td>4/21/18</td>
<td>N</td>
<td>4/21/18</td>
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<td>N/A</td>
<td>N</td>
<td>N/A</td>
<td>4/21/18</td>
<td>4/21/18</td>
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<tr>
<td>1016</td>
<td>1828</td>
<td>3/1/18</td>
<td>3/1/18</td>
<td>N</td>
<td>N</td>
<td>4/21/18</td>
<td>N</td>
<td>4/21/18</td>
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<td>N/A</td>
<td>N</td>
<td>N/A</td>
<td>4/21/18</td>
<td>4/21/18</td>
</tr>
</tbody>
</table>

**Legend**
- CON: Certificate of Need
- CAC: Certificate of Access
- N: Yes
- Y: No
- N/A: Not Applicable
- Rev: Revised
- Adv: Approval
- RAS: Request for Additional Information
- APP: Application
- DERM: Dermatology
- HOS: Hospital
- OT: Occupational Therapy
- POC: Podiatry
- PAC: Pathology
- PCP: Primary Care Physician
- PHR: Physical Therapy
- PHN: Physician Assistant
- PRN: Residency Training Program
- RRT: Respiratory Therapy
- SLP: Speech-Language Pathology
- SRT: Speech-Language Pathology
- TNP: Tuition Negotiation Program
- URO: Urology
- WOC: Wound Care

As of Week ending 4/1/18
Most Projects remain on Project File
39 days after completion
<table>
<thead>
<tr>
<th>FullONY/Service Type</th>
<th>Project Description</th>
<th>Date Application Received</th>
<th>Data Application Received</th>
<th>Data On Record Date</th>
<th>Date of Public Notice of Application</th>
<th>Application Recommended for Approval/Disapproval</th>
<th>Hearing Requested</th>
<th>Hearing Held</th>
<th>Hearing Held</th>
<th>Date of Final Order Published</th>
<th>Final Order Published</th>
<th>Date Withdrawn</th>
<th>Application Withdrawn</th>
<th>Date &amp; Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital</td>
<td>1019 Review Number: 1019-2014-0126-0090</td>
<td>4/10/19</td>
<td>4/26/19</td>
<td>5/30/19</td>
<td>6/1/19</td>
<td>6/1/19</td>
<td>7/9/19</td>
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<td>7/9/19</td>
<td>7/9/19</td>
<td>7/9/19</td>
</tr>
</tbody>
</table>
## Hearings

<table>
<thead>
<tr>
<th>Type of Hearing</th>
<th>Project Description</th>
<th>Hearing Request Deadline</th>
<th>Hearing Request Date</th>
<th>Hearing Requestor</th>
<th>Date Notice of Hearing Request Sent to Parties</th>
<th>Deadline to Schedule Hearing (60 days from receipt of Request, Unless Both Parties Request Waiver)</th>
<th>Agreement to Waive Time Period for Review (Y/N)</th>
<th>Hearing Date and Location</th>
<th>CON Legal Notice Publication Deadline</th>
<th>CON Legal Notice Publication Date</th>
<th>Hearing Withdrawn (Y/N) &amp; Date</th>
<th>Hearing Briefer 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 (Y/N) &amp; Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: 15-NS-2016-002 Oxford Pre-Op &amp; Imaging Center, LLC 42/9/b Oxford Pre-op &amp; Imaging Center Acquisition or Otherwise Control of Magnetic Resonance Imaging (MRI) and Offering of MRI Services Capital Expenditure: $1,906,457.00 Location: Oxford, Lafayette County, Mississippi</td>
<td>6/6/16</td>
<td>6/3/16</td>
<td>Requestor(s): Baptist Memorial Hospital-North Mississippi, Inc. 12/5/9 Baptist Memorial Hospital-North Mississippi 88/9 North Mississippi Imaging Services, LLC 42/9/b Oxford Diagnostic Center</td>
<td>8/2/16</td>
<td>Y</td>
<td>N</td>
<td>10/14/16 through 10/21/16</td>
<td>10/27/16</td>
<td>9/9/16</td>
<td>N</td>
<td>1/29/17</td>
<td>1/29/17</td>
<td>3/2/17</td>
<td>Recommended Approval 3/13/17</td>
<td>Y</td>
<td>4/26/17</td>
</tr>
<tr>
<td>Hearing During the Course of Review</td>
<td>CON Review Number: 15-NS-2017-013 Memorial Hospital at Gulfport Acquisition of Mobile MRI Unit &amp; Offering of Mobile MRI Services Capital Expenditure: $595,000.00 Location: Gulfport, Harrison County, Mississippi</td>
<td>12/9/18</td>
<td>11/29/18</td>
<td>Singing River Health System 770/9 Region</td>
<td>12/12/18</td>
<td>1/28/18</td>
<td>Y</td>
<td>Hearing Scheduled Revised: 4/2/19 - 4/4/19 and 4/7/19 - 4/9/19</td>
<td>4/7/19</td>
<td>4/7/19</td>
<td>Location: LeFleur’s Square (Licensure &amp; Certification)</td>
<td>1/29/19</td>
<td>4/7/19</td>
<td>4/7/19</td>
<td>Recommended Approval 9/17/19</td>
<td>Y</td>
<td>10/11/19</td>
</tr>
</tbody>
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As of: Week Ending 4/12/19
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## Six Month Extensions/Progress Reports (SME/Prog. Rep.)

<table>
<thead>
<tr>
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<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-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: $97,113,596.00 | 11/15/17       |                            |                            |               |                               |
| ESRD                  | CON Review Number: ESRD-N15-0617-008  
CON Number: R-0929  
RCG Southaven, LLC  
d/b/a Renal Care Group Senatobia Establishment of Satellite ESRD Facility  
Capital Expenditure: $3,160,416.25  
Capital Expenditure Made to Date: $0.00 | 2/5/2019       | N                          | N/A                        | 3/5/19        | Granted                       |
| Nursing Home          | CON Review Number: NH-A-0617-006  
CON Number: R-0643-A  
Bedford Care Center - Warren Hall, LLC,  
d/b/a Bedford Care Center Picayune  
120-Bed Nursing Home Replacement Facility in Picayune, Mississippi Amendment and Cost Overrun to CON Review No. NH-RLS-0304-003; CON No. R-0643  
Original Capital Expenditure: $6,530,500.00  
Additional Capital Expenditure: $7,637,248.00  
Revised Capital Expenditure: $14,167,748.00  
Capital Expenditure Made to Date: $5,857,646 | 2/6/2019       | N                          | N/A                        | 3/5/19        | Granted                       |

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<th>Additional Info Received</th>
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<th>Granted/Denied/Project Closed</th>
</tr>
</thead>
</table>
| Nursing Home          | CON Review Number: NH-RC-1216-024  
CON Number: R-0922  
St. Catherine's Village, Inc.  
Construction of an Addition and Renovation of a Skilled Nursing Home (Siena Center)  
Authorized Capital Expenditure: $26,267,140.26  
Capital Expenditure Made to Date: $10,649,908.59 | 2/11/2019     | N                         | N/A                      | 3/11/19        | Granted                     |
| Nursing Home          | CON Review Number: NH-CNF-0618-007  
CON Number: R-0944  
The Mississippi Center for Medically Fragile Children, Inc  
Construction of Pediatric Skilled Nursing Facility and Establishment of Pediatric Skilled Nursing Services and Limited Waiver for Treatment of Individuals Over the Age of 21  
Authorized Capital Expenditure: $12,844,340.01  
Capital Expenditure Made to Date: $0.00 | 2/15/2019     | N                         | N/A                      | 3/15/19        | Filed                       |
| Hospital              | CON Review Number: HG-R-0914-012  
CON Number: R-0885  
George County Hospital  
Hospital Renovation and Expansion  
Authorized Capital Expenditure: $12,584,353.00  
Capital Expenditure Made to Date: $6,786,935.00 | 2/19/2019     | N                         | N/A                      | 3/19/19        | Granted                     |
| Hospital              | CON Review Number: HG-CRF-1203-035  
CON Number: R-0636  
Alliance HealthCare System, Inc.  
Construction of a Replacement Hospital  
Authorized Capital Expenditure: $30,807,769.00  
Capital Expenditure Made to Date: $1,159,085.96 | 2/25/2019     | Y                         | 2/26/19                   | 3/25/19        | Granted                     |

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<th>Additional Info Received</th>
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</tr>
</thead>
</table>
| Hospital             | CON Review Number: HG-RC-0515-008  
CON Number: R-0987  
St. Dominic-Jackson Memorial Renovation and Expansion of Emergency Department  
Authorized Capital Expenditure: $40,071,029.00  
Capital Expenditure Made to Date: $3,984,649.91 | 2/27/2019 | N | N/A | 3/27/19 | Granted |
| ESRD                 | CON Review Number: ESRD-NIS-0616-013  
CON Number: R-0917  
Renal Care Group Tupelo, LLC d/b/a RCG of Tupelo Establishment of Satellite ESRD Facility (Lee County Dialysis)  
Authorized Capital Expenditure: $1,810,565.90  
Capital Expenditure Made to Date: $349,816.00 | 2/27/2019 | N | N/A | 3/27/19 | Granted |
| Hospital             | CON Review Number: HG-COB-0518-005  
CON Number: R-0942  
Singing River Hospital Conversion of 8 Level II CMR Beds to Level I CMR Beds  
Authorized Capital Expenditure: $0.00  
Capital Expenditure Made to Date: $0.00 | 2/28/2019 | N | N/A | 3/15/19 | Closed |
| ESRD                 | CON Review Number: ESRD-REN-0618-006  
CON Number: R-0943  
Bio-Applications of Mississippi, Inc. Establishment of a Six (6) Station ESRD Facility in Talahatchie County  
Authorized Capital Expenditure: $254,085.00  
Capital Expenditure Made to Date: $0.00 | 2/28/2019 | N | N/A | 3/15/19 | Filed |
| Hospital             | CON Review Number: HG-CB-1211-027  
CON Number: R-0848  
Singing River Hospital Addition of Level II Comprehensive Medical Rehabilitation Beds  
Authorized Capital Expenditure: $690,000.00  
Capital Expenditure Made to Date: $467,324.00 | 2/28/2019 | N | N/A | 3/28/19 | Filed |

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<th>Additional Info Requested</th>
<th>Additional Info Received</th>
<th>Date Completed</th>
<th>Granted/Denied/Project Closed</th>
</tr>
</thead>
</table>
| ESRD                  | CON Review Number: ESRD-ES-0117-001  
Renal Care Group Tupelo, LLC d/b/a RCG Sardis  
Expansion of Stations at Existing ESRD Facility Authorized Capital Expenditure: $761,103.60  
Capital Expenditure Made to Date: $0.00 | 3/4/2019      | N                         | N/A                      | 4/4/19         | Granted                      |
| Hospital              | CON Review Number: HG-CB-BANK R-04  
2015-002  
CON Number: R-0419  
Mississippi Alzheimer's Holdings, LLC [Panola Medical Center]  
Establishment of a 20-Bed Alzheimer's Dementia Special Care Unit  
Authorized Capital Expenditure: $0.00  
Capital Expenditure Made to Date: $0.00 | 3/14/2019     | N                         | N/A                      | 4/15/19        | Granted                      |
| LTAC                  | CON Review Number: LTAC-BANK R-03 2 2-15-001  
CON Number: R-0629  
Mississippi LTAC Holdings, LLC [Panola Medical Center]  
Conversion of 35 Acute Care Beds to 35 Long Term Acute Care Beds  
Authorized Capital Expenditure: $416,000.00  
Capital Expenditure Made to Date: $0.00 | 3/14/2019     | N                         | N/A                      | 4/15/19        | Granted                      |
| Skilled Nursing Facility | CON Review Number: NH-CB-0602-036  
CON Number: R-0668  
George Regional Hospital f/k/a George County Hospital  
Establishment/Construction of a 60-Bed Skilled Nursing Facility  
Authorized Capital Expenditure: $676,385.00  
Capital Expenditure Made to Date: $672,050.00 | 4/11/2019     |                           |                          |               |                              |

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## Change of Ownership (CHOW) Applications

As of Week Ending 4/12/19
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<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>Cancer Center</td>
<td>Caring River Cancer Center (Natchez)</td>
<td>2/11/19</td>
<td>3/13/2019</td>
<td>2/13/2019</td>
<td>N/A</td>
<td>N</td>
<td>N/A</td>
<td>Approved 3/13/2019</td>
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<tr>
<td>Imaging Center</td>
<td>Mississippi Diagnostic Imaging Center</td>
<td>4/1/19</td>
<td>4/30/2019</td>
<td>4/4/2019</td>
<td></td>
<td>Y</td>
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<tr>
<td><strong>Home Health</strong></td>
<td><strong>Continue Care Home Health Services, Inc.</strong></td>
<td><strong>4/11/19</strong></td>
<td><strong>5/11/19 (Saturday)</strong></td>
<td><strong>5/13/19 (Monday)</strong></td>
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<tr>
<td><strong>Home Health</strong></td>
<td><strong>Continue Care Home Health Services II, Inc</strong></td>
<td><strong>4/11/19</strong></td>
<td><strong>5/11/19 (Saturday)</strong></td>
<td><strong>5/13/19 (Monday)</strong></td>
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