Determination of Reviewability

| 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 | University of Mississippi Medical Center Renovation for Interventional Radiology | 5/17/18 | 5/22/18 | 5/22/18 | 7/1/18 | N | N/A | 6/19/18 |
| ESRD | DaVita Singing River Dialysis Renovation and Expansion of DaVita Singing River Dialysis Facility | 6/1/18 | 6/8/18 | 6/7/18 | 7/16/18 | | | |
| ESRD | RCG Mississippi, Inc. d/b/a Renal Care Group - Vicksburg Expansion of ESRD Facility | 6/5/18 | 6/11/18 | 6/7/18 | 7/20/18 | N | N/A | 7/5/18 |
| Single Specialty Ambulatory Surgery Center | Oxford Urocare, PLLC Urology | 6/14/18 | 6/21/18 | 6/18/18 | 7/29/18 | | | |
| Single Specialty Ambulatory Surgery Center | Ocean Springs Surgical & Endoscopy Center, MS Coast Endoscopy & Ambulatory Surgery Center, Plan of Merger by and Among Enterprise Parent Holdings, Inc., Enterprise Merger Sub Inc. and Envision Healthcare Corporation | 6/25/18 | 7/2/18 | 7/2/18 | 8/9/18 | | | |
| Nursing Home | Covington Community Care Center, LLC Construction of Replacement Facility for Covington County Nursing Center | 7/5/18 | 7/10/18 | 7/9/18 | 8/19/18 | | | |

Legend

| Project Name and Description | Date Received | Earliest Date CON Application May Be Filed (15 days from date NOI Received) | Date NOI Expires (6 months from date NOI Received) |
|--|---------------|---|--|
| Garden Park Medical center Provision of Cardiac Catherization and Percutaneous Intervention (PCI) Services without On-site Open Heart Surgery; Provision of Peripheral Vascular Catheterization Services, and Acquisition of Equipment to Provide Cardiac Catherization, PCI, and Peripheral Vascular Catherization Services | 1/19/18 | 1/24/18 | 6/9/18 |
| Jefferson County Hospital Changing Geri-Psychiatric Beds to Behavioral Health | 2/18/18 | 3/15/18 | 7/28/18 |
| Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Kidney Care Hanging Moss Establishment of Satellite ESRD Facility | 3/1/18 | 3/16/18 | 8/1/18 |
| Jefferson County Hospital County Hospital Swing Bed Program | 3/5/18 | 3/20/18 | 8/5/18 |
| Heavenly Angels Community Center Construction | 4/19/18 | 5/4/18 | 9/19/18 |
| Fresenius Medical Care East McComb Dialysis, LLC Establishment of Satellite ESRD Facility | 5/29/18 | 6/13/18 | 10/29/18 |
| The Mississippi Center for Medically Fragile Children, Inc. Construction of Pediatric Skilled Nursing Facility and Establishment of Pediatric Skilled Nursing Services and Limitied Waiver for Treatment of Individuals Over Age 21 | 6/5/18 | 6/20/18 | 12/5/18 |

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'l into 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/H) | Date Additional info Received | Staff Analysis Due Date (45 days from date application filed) | Staff Analysia Publication Date | Application Recommended for Approval/ Disapproval | Hearing Request Deadline (10 days from Staff Analysis Publication Date) | Hearing Requested (Y/N) | Deadline for Add'l Info on Negative Staff Anelysis (15 days from Staff Anelysis Publication Date) | Add'i info Received on Negotive Staff Analysis | Date Final Order Notice Published | Deadline to Issue Final Order (90 days from date application received OR 45 days from Hearing Officer | Final Order Issued/ Effective Date | Chancery Court Appeal Filed (Y/N) | Application Withdrawn (Y/N) & Date |
|--|---|---------------------------------|--|---|---|---------------------------------------|-------------------------------------|--|------------------------------------|--|---|-------------------------------|--|---|---|---|--|---|--|
| FS MRI Facility | EON Review Number: FS-NIS 0216-002 Ddrod Pre-Op & Imaging Center, LLC 4/J/b Oxford Pre-Op & Imaging Center Acquisition or Otherwise Control of Magnetic Resonance Imaging (MRI) and Differing of MRI Services Lapital Expenditure: \$1,935,457.00 iocation: Oxford, Lalayette County, Mississippi | 2/26/16 | N/A | 3/27/16 Deemed Complete | 4/1/16 | N | N/A | N/A | 5/16/16 | Approval | 6/6/16 | ▼ | N/A | N/A | 3/37/17 | 4/27/17 | 4/30/17 | (4) | |
| Clinic | CON Review Number: C-NIS-0616-010 Wound Care Management, ILC 4/3/2 MedCentra, ILC 4/3/2 MedCentra, ILC 4/3/2 MedCentra, ILC 4/3/2 MedCentra, ILC 4/3/2 Med | 5/27/16 | 6/11/16 | 7/1/16 Deemed Complete | 7/1/16 | N | N/A | 7/11/16 | 8/35/16 | Appreval | 8725/16 | * | 8/30/16 | N/A | 8/18/17 | 8/25/16 Revisied 9/28/17 | 9/28/17 | • | |
| Multi Specialty Ambulatory Surgery C enter | CON Newlew Number: ASC-NIS-G818-G919 Columbus Orthopaedic Outpatient Center, LtC Conversion of an Existing Single-Specialty Ambulatory Surgery Center to a Multi- Specialty ASC Capital Expenditure: \$855,961.77 Iocation: Columbus, Lowndes County, Misshappi | 8/23/16 | 9/7/16 | 9/7/16 Deemed Complete | 9/7/16 | и | 6/25/16 | 10/7/16 | 10/7/16 | Approval | 10/17/36 | * | 10/22/16 | N/A | 6/22/18 | 11/21/2016 Revised 8/6/18 | | | |
| Mobile MRI Services | CON Review Number: HG-NIS-0937-013 Baplist Medical Center, LLC d/h/a BMC-Attala Establishment of Mobile MRI Services Capital Expenditure: \$1,250.00 Location: Kosciusko, Attala County, Mississippi | 9/29/17 | 10/14/17 (Salurday) 10/16/17 (Monday) | 10/16/17 Dearned Complete | 10/16/17 | × | 11/12/17 | 11/13/17 | 11/13/17 | Approval | 11/23/17 | Y | 11/28/17 | N/A | 6/22/18 | 12/28/17 Revised 8/6/18 | | | |
| Behavioral Health Center | EON Review Number: HP-0-0218-003 Gulfport Behavioral Health System Transfer of Beds Eapital Expenditure: \$0.00 location: Gulfgort, Harrison County | 2/26/18 | 3/13/18 | 3/13/18 Deemed Complete | 3/14/18 | .,4 | 3/16/18 | 4/12/18 | 4/12/18 | Approval | 4/22/18 | N | 4/27/18 | N/A | 4/25/1B | 5/27/18 (Sunday) 5/28/18 (Monday) | 5/29/18 | N | |
| Major Medical Equipment | EON Review Number: Drange Grove Urgent Care Addition of CT Scanner | 4/3/18 | 4/18/2018 (Revised due to Agreement to Waive Time Periods) | | | | | 5/18/18 Remed | | | 5/28/18 Revised | | 6/2/18 Revised | | | 7/2/18 Revised | | | |
| Hospital | CON Review Number: HG-MME-0418-004 forent General Hospidal Addition of Linear Accelerator Capital Expenditure: 55,654,762 Location: Hattesburg, Forrest County, Mississippi | 4/19/18 | S/4/18 | 5/4/18 Deemed Complete | 5/4/18 | W. | N/A | 6/3/18 (Sunday) 6/4/18 (Monday) | 6/4/18 | Appreval | 6/14/18 | ON: | 6/19/18 | N/A | 6/20/18 | 7/38/18 | | | |
| Hospital | COM Review Number: HG-COB-0518-005 Singing River Health System d/b/s Singing River Hosphal Conversion of Eight (8) Level II CMR Beds to Level I CMR Beds Capilal Expenditure: \$0.00 Iocation: Pascagoula, Jackson County, Michedolopi. | 5/30/18 | 6/WII | 6/20/18 (Deerned Complete) | 6/20/18 | н | N/A | 7/14/18 (Saturday) 7/16/18 (Monday) | | | 7/26/18 | | 7/31/18 | | | 8/29/18 | | | |
| ESRO Facility | CON Review Number: ESRD-REN-0518-006 Bio-Medical Applications of Missivsippi, Inc. 40/yla Fersenius Medical Care Establishment of Six (6) Station ISRO Facility in Tallaharthic Capital Expenditure: S25A,085 Iocation: Flowood, Rankin County, Mississippi | 6/1/18 | 6/16/18 (Saturday) 6/18/19 (Monday) | 6/20/18 (Deemed Complete) | 6/20/18 | N | N/A | 7/16/18 | | | 7/26/18 | | 7/31/18 | | | 8/30/18 | | | |

| Facility/Service Type | Project Description | Date Application Received | Deadline for Notllying Applicant that Application is Deemed Complete/Add'l 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 Due Date (45 days from date application filed) | Staff Analysis Publication Date | Application Recommended for Approval/ Disapproval | Hearing Request Deadline (10 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'i info Received on Negetive Staff Analysis | Dete Final Order Noritæ Published | received OR 45 | Final Order Issued/ Effective Date | Chancery Court Appeal Filed (Y/N) | Application Withdrawn (Y/N) & Date |
|-----------------------|--|---------------------------------|--|---|---|---------------------------------------|-------------------------------------|--|------------------------------------|--|---|-------------------------------|--|---|---|----------------|--|---|--|
| | COM Review Hursberr, NH CRF-0818-007 The Mississippi Center for Medically Fragile Childran, Inc. Construction of Pediatric Skilled Nursing Facility and Establishment of Pediatric Skilled Nursing Services and Limited Walver for Treatment of Individuals Dee Age 21 Location: Jackson, Hinds Ceunity, Mississippi | 6/20/18 | 7/5/18 | 7/5/18 (Deemed Complete) | 7/5/18 | N | N/A | 8/4/18 (Saturday) 8/6/18 (Monday) | | | N/A | | B/21/18 | | | 9/18/18 | | | |
| | CON Review Number: ESRD-NIS-0618-008 Fremenius Medical Care East McComb Dialysis, LIC d/b/a Fremenius Medical Care Est McComb Establishment of Satellite ESRD Facility Capital Expenditure: \$4,010,432-35 Location: McComb, Pike County, Misaksippl | 6/29/18 | 7/14/18 (Salurday) 7/16/18 (Monday) | | | | | B/13/18 | | | a/23/1B | | 8/28/18 | | | 9/27/18 | | | |

Hearings

| | | | | - | | | | | | | | | | | | | |
|--------------------------------------|--|--------------------------------|----------------------------|--|---|---|---|--|--|--|---|-------------------------|---------------------------|--|---|--|---|
| Type of Hearing | Project Description | Hearing Request Deadline | Hearing Request Date | Hearing Requestor | Date Notice of Hearing Request Sent to Parties | Deadline to Schedule Hearing (60 days from Receipt of Request, Unless Both Parties Request Waiver) | Agreement to Waive Time Perlod for Review (Y/N) | Hearing Date and Location | CON Legal Notice Publication Deadline | CON Legal Notice Publication Date | Hearing Withdrawn (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/S. Ct. Appeal (Y/N) & Date |
| the Course of Review | CON Review Number: FS-NIS-0216- 002 Oxford Pre-Op & Imaging Center, LLC d/b/a Oxford Pre-op & Imaging Center Acquisition or Otherwise Control of Magnetic Resonance Imaging (MRI) and Offering of MRI Services Capital Expenditure: \$1,935,457,00 Location: Oxford, Lafayette County, Mississippi | 6/6/16 | | Requestor(s): Baptist Memorial Hospital-North Mississippi, Inc. d/b/a Baptist Memorial Hospital-North Mississippi BMH North Mississippi Imaging Services, LLC d/b/a Oxford Diagnostic Center | | 8/2/16 | Y | 10/24/16 through 10/26/16 Licensure | 10/14/16 | 9/9/16 | N | 1/27/17 | 1/27/17 | 3/13/17 | Recommended Approval 3/13/17 | Y 4/26/17 Opinion Upholding MSDH Decision 8/8/17 | Y 9/8/17 |
| the Course of Review | CON Review Number: C-NIS-0616- 010 Wound Care Management, LLC d/b/a MedCentris Provision of Digital Subtraction Angiography (DSA) Services (Limb Salvage Program) Capital Expenditure: \$317,487,00 Location: Vicksburg, Warren County, Mississippi | 8/25/16 | 8/24/16 | Vicksburg Healthcare, LLC d/b/a Merit Health River Region | 8/30/16 | 10/23/16 | Y | 3/6/17 through 3/9/17 Licensure 4/11/17 through 4/12/17 Underwood | 2/24/17 | 2/15/17 | N | 6/30/17 | 6/30/17 | 8/14/17 | Recommended Approval B/14/17 | Y 10/11/17 | |
| the Course of Review | CON Review Number: ASC-NIS-0816 019 Columbus Orthopaedic Outpatient Center, LLC Conversion of an Existing Single- Specialty Ambulatory Surgery Center to a Multi-Specialty ASC Capital Expenditure: \$855,961,77 Location: Columbus, Lowndes County, Mississippi | 10/17/16 | 10/17/16 | OCH Regional Medical Center (Betty Toon Collins, Wise Carter) Baptist Memorial Hospital-Golden Triangle, Inc. d/b/a Baptist Memorial Golden Triangle (Barry Cockreli, Baker Donelson) | 10/28/16 | 12/16/16 | Y | 2/14/17 through 2/16/17 Underwood Postponed 2/10/17 | 2/4/17 | 1/25/17 | Y 6/21/18 | N/A | N/A | N/A | N/A | | |
| During the Course of Review | CON Review Number: HG-NIS-0917-013 Baptist Medical Center Attala, LLC d/b/a BMC-Attala Establishment of Mobile MRI Services Capital Expenditure: \$1250.00 Location: Kosciusko, Attala County, Mississippi | 11/23/17 | 11/20/17 | Premier Medical Group of Mississippi, LLC d/b/a Kosciusko Medical Group | 12/4/17 | 1/27/18 | Y | N/A | N/A | N/A | Y 6/21/18 | N/A | N/A | N/A | N/A | | |

Legend

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
|----------------------------|--|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Hospital | CON Review Number: HG-R-0415-007 CON Number: R-0895 PHC-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 | _ | |
| 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, Therapeautic Cardiac Catherization, Open Heart Surgery Equipment and Services and Obstetrics Authorized Capital Expenditure Made to Date: \$97,135,596.00 | 11/15/17 | | \$ | | |
| Medical Office Building | CON Review Number: MOB-C-0316-005 CON Number: R-0911 Methodist Le Bonheur Healthcare Construction of Medical Office Building Authorized Capital Expenditure: \$ 6,568,860.00 Capital Expenditure Made to Date: \$49,692 | 5/25/18 | N | N/A | 6/22/18 | Granted |
| Hospital | CON Review Number: HG-RC-0316-003 CON Number: R-0909 Baptist Memorial Hospital - DeSoto, Inc. Emergency Department Addition Authorized Capital Expenditure: \$19,204,530.00 Capital Expenditure Made to Date: \$7,986,593 | 5/30/18 | N | N/A | 6/26/18 | Granted |

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

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Hospital | CON Review Number: LTAC-RLS-1115-024 CON Number: R-0902 Promise Hospital of Vicksburg Relocation of Promise Hospital of Vicksburg to Merit Health Vicksburg f/k/a River Regional Medical Center Authorized Capital Expenditure: \$397,000.00 Capital Expenditure Made to Date: \$337,405.00 | 6/8/18 | N | N/A | 6/25/18 | Granted |
| ESRD | CON Review Number: ESRD-ES-0917-012; CON Number: R-0933 Fresenius Medical Care Jackson Expansion of Stations at Existing ESRD Facility Authorized Capital Expenditure: \$27,494.00 Capital Expenditure Made to Date: \$0.00 | 6/14/18 | N | N/A | 6/21/18 | Filed |
| ESRD | CON Review Number: ESRD-ES-0917-012; CON Number: R-0933 Fresenius Medical Care Jackson Expansion of Stations at Existing ESRD Facility Authorized Capital Expenditure: \$27,494.00 Capital Expenditure Made to Date: \$0.00 | 6/14/18 | N | N/A | 6/27/18 | Closed |
| Hospital | CON Review Number: HG-CB 0909-023 CON Number: R-0817 Methodist Healthcare-Olive Branch Hosp. Construction of a 100 Bed Acute Care Hosp., MRI, Therapeutic Cardiac Cath., Open-Heart Surg. Equip & Srvs, and Obstetrics Authorized Capital Expenditure: \$137,080,000.00 Capital Expenditure Made to Date: \$97,817,554.00 | 6/29/18 | | | | |

Legend

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

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
|--------------------------|--|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Hospital | CON Review Number: HG-RC-0616-011; CON Number: R-0915 South Central Regional Medical Expansion MOB Project Authorized Capital Expenditure: \$35,000,000 Capital Expenditure Made to Date: \$19,870,567 | 7/12/18 | | | | |
| Hospital | CON Review: HG-SB-0517-005 Forrest County General Hospital Offering of Swing Bed Services Authorized Capital Expenditure: \$0.00 Capital Expenditure Made to Date: \$0.00 | 7/13/18 | | | | |
| Hospital | CON Review: HG-NIS-1017-014 CON Number: R-0934 Winston County Medical Center Winston County Medical Center MRI Service Project Authorized Capital Expenditure: \$44,895.00 Capital Expenditure Made to Date: \$29,458.78 | 7/13/18 | | | | |

As of Week Ending 7/13/18 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 |
|--------------------------|--|------------------|--|----------------------------|-------------------------------------|---------------------------------|-----------------------------|---|
| Nursing Home | Columbia Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Cornerstone Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Crystal Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Delta Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Great Oaks Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Holly Springs Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Grenda Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Indianola Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |

<u>Legend</u>

Columns in Red = Deadlines set by statute or policy

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

Change of Ownership (CHOW) Applications

As of Week Ending 7/13/18 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 |
|--------------------------|--|------------------|--|----------------------------|-------------------------------------|---------------------------------|-----------------------------|---|
| Nursing Home | Natchez Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Picayune Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | The Bluffs Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Woodlands Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |
| Nursing Home | Yazoo City Rehabilitation and Healthcare Center (Nexion Health at Columbia, Inc.) | 5/29/18 | 6/28/18 | 6/5/18 | 6/14/18 | N | N/A | Approved 6/20/18 |