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
	Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Kidney Care Mid- Delta Home Theraphy Relocation of Home Training Program	12/11/18	12/17/2018	12/14/2018	1/10/19	N	N/A	1/8/19
ESRD								
	Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Kidney Care Kosciusko Expansion of Stations at Existing ESRD Facility	12/11/18	12/17/2018	12/14/2018	1/10/19	N	N/A	1/8/19
ESRD								
MRI	Southern Bone & Joint Specialists, PA Replacemet of Magnetic Resonance Imaging (MRI) Equipment	12/14/18	12/21/2018	12/18/18	1/28/19	N	N/A	1/10/19
Ambulatory Surgery Center	Columbus Orthopaedic Outpatient Center, LLC Outpatient Center	1/4/18	1/9/2018	1/8/18	2/23/19 (Saturday 2/25/19 (Monday)			

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)
2nd Generation Healthcare, LLLC d/b/a The Grove	9/26/18	10/11/18	3/26/19
Relocation and Additon of Nursing Home Beds			
	10/1/18	10/16/18	4/1/19
Bio-Medical Applictions of Mississippi, Inc. d/b/a Fresenius Medical Care Amendment to CON for Establishment of ESRD Facility in Tallahatchie County			
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 Catjerization Services	10/16/2018	10/31/18	4/16/19
Community Place Amendment to CON Review Number: NH- CRF-0908-039; R-0786 Community Place Relocation	11/16/18	12/2/18	5/16/19
River Oaks Hospital, LLC d/b/a River Oaks Hospital Offering of Percutaneous Coronary Intervention Sevices	11/19/2018	12/4/18	5/19/19

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 Completes/Add Tiefes to 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'i info on Negative Staff Anaiysis Staff Anaiysis Publication Date)	Add'l info Received on Negative Staff Analysis	Date Final Order Notice Published	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 (Y/N)	Application Withdrawn (Y/N) & Date
NOS WORKSHI	CON Beview Number: 5-818-0215-002 Déterd Per-Da Emigaing Center, LC 9/bylo Oldrad Per-Da El maging Center Acquisition or Otherwise Control of Magnetic Resonance imaging (ARI) and Offering of MMI Services Capital Expenditure: 51,935,457.00 Location: Oxford, Lafayette County, Mississippi	2/25/16	N/A	3/21/16 Deemed Complete	4/1/16	и	N/A	N/A	5/16/16	Approval	6/6/16	1963	N/A	N/A	3/17/17	4/27/17	4/10/17	A.	
	CON Review Number: C-NIS-0616-010 Wound Care Management, LLC dyly/a Medicant's Arrows and Provision of Oligical Subtraction Angiography (DSA) Services (Limb Salvage Program) Capital Expandifure: \$317,487.00 Location: Yicksburg, Warren County, Mickscholani.	5/27/16	6/11/16	7/1/16 Deemed Complete	7/1/16	×	N/A	7/11/16	8/15/16	Арріона	8/25/16	Y	8/30/16	N/A	8/18/17	8/25/16 9/28/17	9/28/17	Y	
Skilled Nursing Facility	CON Review Number: NH-RIS-DEIR COS Belhaven Senior Care, LLC Relocation of Belhaven Senior Care to New Building in Madison County Capital Expenditure: \$12,593,624 Location: Jackson, Hinds County, Mississippi	8/28/18	9/12/18	9/11/18	9/11/18	H	N/A	10/12/18	10/12/18	Approval	10/22/18	. J	10/27/18	N/A	N/A Hearing Scheduled	11/26/18	N/A Hearing Scheduled		
ESRD Facility	CON Review Number: ESRU-NIS-0918-010 Fresenius Medical Care Dogwood, LLC d/b/a Fresenius Kidney Care Dogwood Establishment of Satellite ESRD Facility Capital Expenditure: \$3,865,678.62 Location: Flowood, Rankin County, Mississippi	9/12/18	9/27/18	9/27/18 (Deemed Complete)	9/27/18	γ	9/25/18	10/27/18 (Saturday) 10/29/18 (Monday)	10/29/18	Approval	11/8/18	N.	11/13/18	N/A	11/26/18	12/91/18	12/11/18		
	CON Review Number: ESRD-ES-0918-011 Lakeland Home Program, LLC (Flya Bio- Medical Applications Mississippi, inc currently d/b/a Fresenius Medical Care West Hinds County Expansion of Stations at Enisting ESRD Facility Capital Expanditure: \$10,244.06 Location: Clinton, Hinds County, Mississippi	9/12/18	9/27/18	9/27/18 (Deemed Complete)	9/27/18	М	N/A	10/27/18 (Saturday) 10/29/18 (Monday)	10/29/18	Approval	11/8/18	98.3	11/13/18	N/A	11/26/18	12/11/18	12/11/18		
	CON Review Number: ESRD ES-1018-012 Bio-Medical Applications Mississippi, Inc. 4/04 Fresenius Medical Care Mid Mississippi Expansion of Stations at Existing ESRD Facility Capital Expanditure: \$10,244.06 Location: Jackson, Hinds County, Mississippi	10/7/18	10/17/18	10/17/18	10/17/18	Y	10/17/18	11/16/18	11/16/18	Approval	11/26/18	(19):	12/1/18 (Saturday) 12/3/18 (Monday)	N/A	11/26/18	12/31/18	12/28/18		
	CON Review Number:HG-NIS-1018-013 Memorial Hospital at Gullport Acquisition of Mobile MRI Unit & Offering of Mobile MRI Services Capital Expenditure: \$595,00 00 Location: Gullport, Harrison County, Missistanai	10/8/18	10/23/18	10/23/18	10/23/18	Y	11/19/18	11/22/18	11/20/18	Approval	12/2/18 (Sunday) 12/3/18 (Monday)	- A.	12/8/18	N/A		1/6/19			
	Acception: CON Review Number: NH-RIS-1118-014 And Generation Healthcare, LLC d/b/a The Grove Relocation and Addition of Nursing Home Back Capital Expenditure: \$10,000.00 Lotation: Columbia, Marion County, Miccectioni	11/15/18	13/31/18	Incomplet: {Requestfor Additional information sent 11/20/18}Deadline for info is Dec. 5th	12/5/18	*	12/5/18	12/30/18 (Sunday) 12/31/18 - 1/1/19 (Holiday) 1/2/19	1/2/19	Approved	1/14/19		1721/19			2/13/19			

Facility/Service Type	Project Description	Date Application Received	Deadline for Notifying Applicant that Application is Deemed Complete / Addit into its 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 tiled)	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 Negative Staff Analysis	Date Final Order Notice Published	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 (Y/N)	Application Withdrawn (Y/N) & Date
	CON Review Number: IIG-MS-1218-015 River Oaks Hospital, ILC d/Jy-A Morth Health River Oaks Officing of Percutaneous Coronary Intervention (PCI) Services in a Hospital without On-Site Cardiac Surgery Capital Expenditure: \$89,751.00 Location: Flowood, Rankin County, Mississippi	12/14/18	12/29/18	12/27/18 Incomplete Letter Sent- Deadline for additional info is 1/11/19				1/28/19			2/7/19		- 2/12/19			3/14/19			
	CON Review Number: NH-A-0119-001 Community Place Amendment to CON Review Number: NH-CRF 0908-039: R-0786 Community Place Relocation Capital Expenditure: 59,870,000 00 location: Jackson, Hinds County, Mississippi	1/2/19	1/17/19					2/16/19 (Salurday) 2/18/19 (Monday)			2/28/19		3/5/19			4/2/19			
	CON Review Number: ASC-CO-0119-002 Columbus Orhopaedic Outpatient Center, LtC Amendment/Costoverrun GCON Review Number: ASC-NIS-0816-019, R-0340 Conversion of an Existing Single-Specialty Ambulatory Surgery Center to a Multi- Specialty ASC Original Capital Expenditure: \$855,961.77 Additional Capital Expenditure: \$370,497.00 Location: Cofumbus, Lowndes County, Mississippi	1/4/19	1/19/19 (Saturday) 1/21/19 (Monday)					2/18/19			2/28/19		3/5/19			4/2/19			
	CON Review Number: NG-NIS-0119-003 Garisan Park Medical Center Provision of Cardia Catherization and Percutaneous Intervention (PCI) Services without On-site Open Heart Surgery; Provision of Peripheral Viscoular Cotheterization Services, and Acquisition of Equipment to Provide Cardiac Catherization, PCI and Peripheral Viscoular Catgerization Services Copiliol Expenditure: \$2,281,927 Location: Gulfport, Harrison, Misskistppl	1/11/19	1/26/19 (Saturday) 1/28/19 (Manday)					2/25/19			2/4/19		2/9/19 (Saturday) 2/11/19 (Mondoy))			4/11/19			

Type of Hearing	Project Description	Hearing Request Deadline	Hearing Request Date	Hearing Requestor	Date Notice of Hearing Request Sent to Partles	Deadline to Schedule Hearing (60 days from Receipt of Request, Unless Both Parties Request	Agreement to Waive 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 Flled	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
	CON Review Number: FS-NIS-	6/6/16	6/3/16	Requestor(s):		Walver) 8/2/16	Y	10/24/16	10/14/16	9/9/16	N	1/27/17	1/27/17	3/13/17	Recommended	٧	Υ
Hearing During the Course of Review	CON Neview 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	0/0/10	6/3/16	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		6/2/10	•	through 10/26/16 Licensure			N .				Approval 3/13/17	4/26/17 Opinion Upholding MSDH Decision 8/8/17	9/8/17
Hearing During the Course of Review	CON Review Number: C-NIS- D616-010 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 8/14/17	Y 10/11/17 Opinion Upholding MSDH Decision 7/5/18	Y 7/23/18
	CON Review Number: NH-RLS- 0818-009 Belhaven Senior Care, LLC Relocation of Belhaven Senior Care to New Building in Madison County Capital Expenditure: \$12,593,624 Location: Jackson, Hinds County, Mississippi	10/22/18	10/16/18	The Nichols Center Madison, MS Gilchrist Donnell PLLC Brant J. Ryan	10/22/18	12/15/2018 (Saturday) 12/17/18 (Monday)	Y	1/15/19 through 1/17/19 Location: Osbourne Auditorium 1/17/19 Withdrawn 1/11/19									
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	11/29/18	Singing River Health System Gilchrist Donnell PLLC Brant J. Ryan	12/12/18	1/28/19		3/13/2019 thru 3/15/19 Location: Osbourne Auditorium									

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-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				
Hospital	CON Review Number: HG-RC-0316-003 CON Number: R-0909 Baptist Memorial Hospital- DeSoto, Inc. Emergency Deoartnebt Addition Authorized Capital Expenditure: \$19,204,530.00 Capital Expenditure Made to Date: \$16,199,972	11/30/18	N	N/A	12/14/18	Granted
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	11/30/18	N	N/A	12/13/18	Granted

Legend

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

As of Week Ending 1/11/19
Note: Projects remain on Report for
30 days after completion

Facility/Service Type	Project Description	Date Received	Additional Info Requested	Additional Info Received	Date Completed	Granted/Denied/ Project Closed
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: \$49,942	11/30/18	N	N/A	12/13/18	Granted

Change of Ownership (CHOW) Applications

As of Week Ending 1/11/19

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	N/A	Application Approved/Rejected/ Returned/Withdrawn