| 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 |
|------------------------------|---|---------------------------------|---|---|--|---------------------------------------|----------------------------------|----------------------------------|
| PET | Alliance HealthCare Services, Inc., d/b/a Alliance Imaging (Alliance) Positron Emission Tomography/Computer Assisted Tomography Imaging Equipment (PET/CT) Replacement Project Capital Expenditure: \$12,850.00 | 10/15/19 | 10/22/2019 | | 11/29/19 | N | N/A | 10/31/19 |
| | RCG Oxford Home Therapies, LLC d/b/a RCG Oxford Home Therapy Establishment of Home Training Program Capital Expenditure: \$20,965.00 | 11/1/19 | 11/8/2019 | 11/6/19 | 12/16/19 | Y | 11/5/19 | 11/21/19 |
| Ambulatory Surgery Center | Vascular and Vein Institute of the South, PLLC Vein Institute Mississippi Capital Expenditure Revised: \$1,252,531.80 | 11/4/19 | 11/11/2019 | 11/7/19 | 12/19/19 | Y 11/12/19 | 11/20/19 | |
| | Rush Medical Foundation d/b/a Rush Medical Hospital MRI Replacement Capital Expenditure: \$1,539,792.00 | 11/5/19 | 11/12/2019 | 11/8/19 | 12/20/19 | Y 11/22/19 | | |
| | University of Mississippi Medical Center Establishment of Clinical Research and Trials at the University of Mississippi Medical Center Capital Expenditure: \$5,081,339.00 | 11/19/19 | 11/26/19 | 11/22/19 | 1/3/20 | | | |

Columns in Red = Deadlines set by statute or policy

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

Determination of Reviewability

As of Week Ending 11/22/19 and 11/29/19 Note: Projects remain on Report for 30 days after completion.

| Facility/Service | Project Description | Date | Deadline to | Date | Statutory | Additional Info | Date Additional | Date DR |
|------------------|--------------------------------|-------------|------------------|-----------------|--------------|-----------------|-----------------|-------------|
| Туре | | Application | Notify Applicant | Notification to | Deadline to | Requested | Info Received | Completed & |
| | | Received | (5 business days | Applicant Sent | Complete (45 | (Y/N) | | Mailed |
| | | | After Receipt of | | days from | | | |
| | | | Request) | | Receipt of | | | |
| | | | | | Application) | | | |
| | | 11/22/2019 | 12/2/2019 | 11/22/2019 | 1/6/2020 | Y | 11/25/19 | |
| | North Mississippi Medical | | | | | | ' ' | |
| | Center, Inc. | | | | | | | |
| | Replacement of da Vinci | | | | | | | |
| | Surgical Robot | | | | | | | |
| | 830 S. Gloster Street | | | | | | | |
| | Tupelo, (Lee County) MS 38801 | | | | | | | |
| | Capital Expenditure: | | | | | | | |
| | \$1,873,000.00 | | | | | | | |
| Hospital | 7-7 | | | | | | | |
| | Madison Spine Surgery Center, | 11/22/19 | 12/2/19 | 11/25/19 | 1/6/20 | | | |
| | LLC | | | | | | | |
| | Single Specialty Ambulatory | | | | | | | |
| | Surgery Center | | | | | | | |
| | Neurosurgery and | | | | | | | |
| | Interventional Pain | | | | | | | |
| Ambulatory | Management | | | | | | | |
| Surgery Center | Capital Expenditure: N/A | | | | | | | |
| | Tippah County Hospital | 11/25/19 | 12/3/19 | | 1/9/20 | | | |
| | Intensive Outpatient Geriatric | | | | | | | |
| | Psych Unit | | | | | | | |
| Geri Psy | Capital Expenditure: \$0.00 | | | | | | | |

| 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) |
|---|---------------|---|--|
| Forrest County General Hospital Addition to Existing CMR Bed Licenses | 2/21/19 | 3/8/19 | 8/21/19 |
| University of Mississippi Medical Center - Grenada Offering of Swing Bed Services | 3/14/2019 | 3/29/19 | 9/14/19 |
| Modern Vascular of Southaven, LLC in-office Invasive Digital Angiography Services to Southaven, MS | 3/15/2019 | 3/30/19 | 9/15/19 |
| Alliance Health Center, Inc. d/b/a Alliance Health Center Conversion for Expansion of Psychiatric Beds | 3/25/2019 | 4/9/19 | 9/25/19 |
| Bio-Medical Applications of Mississippi, Inc. d/b/a Fresenius Kidney Care - North Jackson Establishment of a Satellite Facility | 4/5/2019 | 4/20/19 | 10/5/19 |
| 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 | 6/28/2019 | 6/13/19 (Saturday) 6/15/19 (Monday) | 12/28/19 |
| Madison Physician Surgery enter, LLC d/b/a Mississippi Sports Medicine and Orthopaedic Center (Flowood Clinic) Offering of MRI Services | 7/12/2019 | 7/27/19 (Saturday) 7/29/19 (Monday) | 1/12/20 |

Columns in Red = Deadlines set by statute or policy

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

Notice of Intent(NOI) to Apply for a CON

As of Week Ending 11/22/19 and 11/29/19 Note: Projects remain on Report for 30 days after completion

| 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) |
|--|---------------|---|--|
| Capital Orthopaedic Clinic, PLLC | | | |
| Offering of MRI Services and Acquisition | | | |
| of MRI Equipment | 7/17/2019 | 8/1/2019 | 1/17/2020 |
| REVISED: NOI (Original Submitted July | | | |
| 12, 2019) | | | |
| 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) | | | |
| | 8/13/2019 | 8/28/2019 | 2/13/2020 |
| Jefferson County Hospital | | | |
| Addition of a Swing Bed Hospital at | | | |
| Jefferson County Hospital | 8/26/2019 | 9/10/2019 | 2/26/2020 |
| | | | 1 |
| Bio-Medical Applications of Mississippi, | | | |
| Inc. d/b/a Fresenius Medical Care Dialysi | | | 1 |
| Services of Rankin County - Brandon Expansion of Stations at Existing ESRD | | | |
| Facility | 9/23/2019 | 10/8/2019 | 3/23/2020 |

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 Notlfying Applicant that Application is Deemed Complete Add 1 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/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 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 | Final Order Issued/ Effective Date | Chancery Court Appeal Filed (Y/N) | Application Withdrawn (Y/N) & Date |
|-----------------------|---|---------------------------------|--|---|---|---------------------------------------|-------------------------------------|--|------------------------------------|--|---|-------------------------------|--|---|--|---|--|---|--|
| FS MRI Facility | COM Review Number: 55-NS-0256-002 Obded Pre-0-6 Imaging Center, LC d/b/a Oxford Pre-0-6 Imaging Center Acquilition or Otherwise Countrel of Magnetic Reseaucce Imaging (NRII) and Offering of MRI Services Capital Expendieurs: 51,935,457.00 Locallon: Oxford, Lafayette County, Mississippi | 2/26/16 | N/A | 3/27/16 Dæmed Complete | 4/1/16 | N | N/A | N/A | 5/16/16 | Approval | 6/6/16 | ay . | N/A | N/A | 3/17/17 | 4/27/17 | 4/10/17 | o¥o | н |
| Clinic | CON Review Number: C-NIS-0616-010 Wound Care Management, LLC d/b/Ja MedCentris Provision of Digital Subtraction Anglography (DsA) Servicus (Limb Salvage Program) Capital Expenditure: \$317,487.00 Lozation: Vickburg, Warren County, Mikskskojos. | 5/27/16 | 6/11/16 | 7/1/16 Deemed Complete | 7/1/16 | H | N/A | 7/11/16 | 8/15/16 | Approval | 8/75/26 | X | 8/10/16 | N/A | B/18/17 | 8/25/16 Revisied 9/28/17 | 9/28/17 | Y | |
| Mili | CON Review Number:HG-NIS-1018-013 Memortal Hospital at Gulfport Acquistion of Mobile MM Unit & Offening of Mobile MM Services Capital Expenditure: \$595,00.00 Localion: Gulfport, Harrison County, Mississions | 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) | Y | 12/8/18 | N/A | Hearing Scheduled Revised: 4/2/19 4/4/19 and 4/11/19-4/12/19 | 1/6/2019 Hearing Scheduled Revised: 4/2/19 4/4/19 and 04/26/19 | | | |
| | SONSCALORS COON Review Murriber: NR 88 - 0819 COP Encompass Health Rehabilitation Hospital of Encompass Health Rehabilitation Hospital of Culfport, LC 40/A Encompass Health Rehabilitation Hospital, a partner of Memorial Hospital of Gulfport Expension and Renovation Project for Encompass Health Rehabilitation Hospital of Culfport, LC Capital Expenditure: \$5,822,056.00 Location: Gulfport, Harrison County, Mississippl | 8/2/19 | 8/17/19 (Salurday) 8/19/19 | 8/19/19 | 8/19/19 | N | N/A | 9/16/19 | 9/16/19 | Арргочед | 9/26/19 | N | 10/1/19 | N/A | 9/26/19 | 10/11/19 | 10/30/19 | N | М |
| | CON Review Number: ASC-NIS-0819-010 Capital Orthopaedic Clinic, PLLC Offering of MRI Services and Acquisition of MRI Equipment Capital Expenditure: \$1,460,800.00 Location: Flowood, Rankin County, Mississippi | 8/1/19 | #/16/19 | 8/23/2019 - complete | 8/23/19 | Y | 9/11/19 | 9/15/19 (Sunday) 9/16/19 (Monday) | 9/16/19 | Approved | 9/26/19 | N. | 10/1/19 | N/A | 9/26/19 | 10/30/19 | 10/30/19 | N | H |

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 Walver) | 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 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 |
|--|--|--------------------------------|-------------------------|---|---|---|---|---|--|--|---|-------------------------|---------------------------|--|---|---|---|
| Hearing During 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 | 6/3/16 | Requestor(s): Baptist Memorial Hospitial-North Mississippl, Inc. d/b/a Baptist Memorial Hospital-North Mississippl BMH North Mississippl Imaging Services, LLC d/b/a Oxford Diagnostic Center | | 8/2/16 | Υ | 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 |
| | 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 8/14/17 | Y 10/11/17 Opinion Upholding MSDH Decision 7/5/18 | Y 7/23/18 |
| 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 | Y | Hearing Scheduled Revised: 4/2/19 -4/4/19 and 4/26/19 Location: LeFieur's Square (Licensure & Certification) | | | | | | | | | |

| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Hospital | CON Review Number: HG-NIS-0119-003 CON Number: R-0954 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; and Renovation Angiography Location: Gulfport, Harrison, Mississispi | 10/11/2019 | N | N/A | 10/31/19 | Filed |
| MRI Facility | CON Review Number: FS-NIS-0216-002 CON Number: R-0924 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 Location: Oxford, Lafayette County, Mississippi Capital Expenditure: \$1,935,457.00 Capital Expenditure Made to Date: \$0.00 | 10/14/2019 | N | N/A | 11/13/19 | Granted |
| Hospital | CON Review Number: NH-CB-0602-036 CON Number: R-0668 George Regional Hosptial f/k/a George County Hospital Establishment/Construction of a 60-Bed Skilled Nursing Facility Authorized Capital Expenditure: \$676,585.00 Capital Expenditure Made to Date: \$672,050 | 10/14/19 | N | N/A | 10/31/19 | Closed |

| | | | | | | 30 |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Facility/Service Type | Project Description | Date Received | Additional Info Requested | Additional Info Received | Date Completed | Granted/Denied/ Project Closed |
| Hospital | CON Review Number: ESRD-NIS-0618-008 CON Number: R-0945 Fresenius Medical Care East McComb Dialysis, LLC Establishment of Satellite ESDR Facility Authorized Capital Expenditure: \$4,010,432.35 Capital Expenditure Made to Date: \$230,00.00 | 10/15/2019 | N | N/A | 11/13/19 | Granted |
| | CON Review Number ESRD-ES-0817-011 CON Number: R-0932 Bio Medical Applications of Mississippi, Inc. d/b/a Fresenius Medical Care- South Mississippi Kidney Center- Orange Grove Expansion of Stations at Existing ESRD Facility Authorized Capital Expenditure: \$2,273,159.89 Capital Expenditure Made to Date: \$0.00 | 10/16/19 | N | N/A | 11/13/19 | Granted |
| | CON Review Number: ESRD-NIS-0918-010 CON Number: R-0946 Fresenius Medical Care Dogwood, LLC d/b/a Fresenius Kidney Care Dogwood Establishment of Satellite ESRD Facility Authorized Capital Expenditure: \$3,865,678.62 Capital Expenditure Made to Date: \$1,225,000.00 | 11/12/2019 | | | | |

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

As of Week Ending 11/22/19 and 11/29/19 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 |
|--------------------------|---|---------------|------------------------------|-----------------------------|----------------|-----------------------------------|
| Medical Office | CON Review Number: MOB-C-0316-005 | 11/22/2019 | | | | |
| Building | 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: | | | | | |
| | \$302,991.00 | | | | | |

Change of Ownership (CHOW) Applications

As of Week Ending 11/22/19 and 11/29/19 Note: Projects remain on Report for 30 days after completion

| | | Date | Deadline to | Date Notice | Date Letter | Additional | Additional Info | Application |
|------------------|---------------------|----------|--------------|-------------|---------------|------------|-----------------|--------------------|
| | | Received | Complete (30 | Sent to DOM | Received from | Info | Received | Approved/Rejected/ |
| Facility/Service | Project Description | | days from | | DOM | Requested | | Returned/Withdrawn |
| Туре | Project Description | | Receipt of | | | | | |
| | | | Application) | | | " | | |
| | | | | | | | | |