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**RECEIVED**

**DEC 23 2015**

STATE HEALTH PLANNING  
AND DEVELOPMENT AGENCY

December 22, 2015

**Via Federal Express**

Hon. Alva M. Lambert, Esq.  
Executive Director  
State Health Planning & Development Agency  
100 North Union St., Suite 870  
Montgomery AL 36104

Re: Request for Reviewability Determination  
Cullman Regional Medical Center

Dear Mr. Lambert:

Our firm represents Cullman Regional Medical Center, an acute care hospital in Cullman, Alabama located at 1912 Alabama Highway 157 Cullman, Alabama 35058 ("CRMC").

The purpose of this letter is to request your determination, pursuant to Section 410-1-7-.02 of the Alabama Certificate of Need Program Rules & Regulations ("Regulations"), that the construction and operation of a diagnostic center and urgent care center on CRMC's campus, within the Cullman County, Alabama, service area, does not require CRMC to obtain a Certificate of Need ("CON") from the State Health Planning and Development Agency.

The scope of the proposed project will not exceed any of the CON expenditure thresholds specified in Section 410-1-2-.07 of the Regulations, of \$2,854,550 for major medical equipment, of \$1,141,819 for new annual operating costs, or of \$5,709,099 for capital expenditures, as currently adjusted for CPI. CRMC estimates that the proposed project will involve the following approximate costs:

Total Construction Cost:	\$3,350,000
Total Equipment Cost:	\$1,100,000
Total Incremental Annual Operating Cost:	\$995,000

The proposed center will be located in a to-be-constructed approximately 8,400 square feet one story building and will incorporate an 128 slice CT and 1.2 Tesla Open MRI machine. All services at the proposed center will be billed through CRMC. CRMC currently operates both CT and MRI equipment on its campus. This project will not involve the addition of inpatient beds or the conversion of one classification of beds into another classification of beds. Further, this project will not result in the provision of any new institutional health services and will not involve financial interests by any other health care facilities or groups other than CRMC.

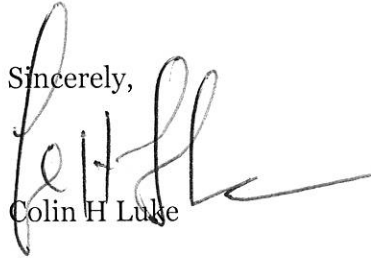
I have enclosed a check for \$ 1,000.00 as payment of the applicable fee.

waller

Hon. Alva Lambert  
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Accordingly, based on the above, we respectfully request your determination that CRMC is not required to obtain a CON in order to complete the proposed project. We appreciate your consideration of this request. Feel free to contact me if you need further information or have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Colin H. Luke', with a long horizontal flourish extending to the right.

Colin H Luke

CHL:rdl

Enclosure