

FILED: [shpda.online@shpda.alabama.gov](mailto:shpda.online@shpda.alabama.gov)

September 24, 2024

Ms. Emily T. Marsal, Executive Director  
State Health Planning and Development Agency  
100 North Union Street, Suite 870  
Montgomery, AL 36104

RE: Gulf Health Hospitals, Inc.  
d/b/a North Baldwin Infirmary

Dear Ms. Marsal:

Pursuant to **Certificate of Need (CON) Rules and Regulations, 410-1-7-.02 Reviewability Determination Request**, please accept this correspondence to request your determination that North Baldwin Infirmary's proposed addition of an operating room on the hospital campus is not subject to CON review.

North Baldwin Infirmary is located at 1815 Hand Avenue in the city of Bay Minette, Baldwin County, Alabama. The proposed project will not add any new beds, provide any new health services, convert any beds from one classification to another classification, or make any expenditures in excess of the applicable spending thresholds under **CON Rules and Regulations 410-1-4-.01 New Institutional Health Services Subject to Review**. There are no other healthcare facilities or groups with a financial interest in the project.

North Baldwin Infirmary anticipates the costs associated with the proposed project as follows:

Construction/Renovation	\$ 452,000
Equipment	\$ 430,000
First Year Operating Costs	\$1,212,423

Based on the information provided, North Baldwin Infirmary respectfully requests the determination that a CON is not required for the proposed project.

The \$1,000 filing fee for this determination request is being submitted through the SHPDA payment portal. Please let me know if you have any questions or need any additional information.

Sincerely,



Stephen D. Preston

Ms. Emily T. Marsal  
State Health Planning and Development Agency  
September 24, 2024

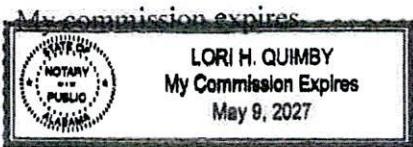
North Baldwin Infirmary Determination Request

Affirmation of Requesting Party:

The undersigned, being first duly sworn, hereby make oath or affirm that he, Joe T. Stough, Vice President of Gulf Health Hospitals, Inc., has knowledge of the facts in this request, and to the best of his information, knowledge and belief, such facts are true and correct.

Affiant Joe T. Stough (SEAL)

SUBSCRIBED AND SWORN to before me this 24th day of September  
Lori H. Quimby  
Notary Public



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October 3, 2024

Ms. Emily T. Marsal  
Executive Director  
State Health Planning and Development Agency  
100 North Union Street, Suite 870  
Montgomery, AL 36104

RE: RV2024-038  
Gulf Health Hospitals, Inc. d/b/a  
North Baldwin Infirmary  
SHPDA ID: 003-6530116

Dear Ms. Marsal:

This letter will confirm my receipt of your October 1, 2024, correspondence requesting additional information regarding the Reviewability Determination Request submitted on behalf of North Baldwin Infirmary (NBI).

- The proposed project will add a fourth (4<sup>th</sup>) operating room at NBI. The existing space is currently shelled. The buildout will consist of extending the HVAC system and medical gases within the room, installing the necessary/required electrical system, installing the surgical light support, hard ceilings, trim out of HVAC, electrical, medical gas in-wall and in-ceiling devices, along with finishing sheetrock, painting, and seamless sheet vinyl flooring.
- Detailed equipment purchases attached.

Please let me know if you have any questions or need any additional information.

Sincerely,



Stephen D. Preston



		<b>OR FOUR</b>	
<b>EQUIPMENT</b>	<b>QUANTITY</b>	<b>VENDOR</b>	<b>PRICING</b>
SURGICAL TABLE	1	SHILSTON & ASSO	<b><i>\$42,741.50</i></b>
OR OVERHEAD LIGHTS	1	SHILSTON & ASSO	<b><i>\$83,395.00</i></b>
NEPTUNE	1	STRYKER	<b><i>\$16,100.00</i></b>
OMNICELL	1	OMNICELL	<b><i>\$45,399.67</i></b>
ULTRASONIC WASHER	1	TBJ SURGISONIC	<b><i>\$20,375.75</i></b>
STERRAD	1	ASP	<b><i>\$110,000</i></b>
CAUTERY MACHINE	1	COVIDIEN	<b><i>\$21,307.64</i></b>
VIDEO EQUIPMENT	1	STRYKER	<b><i>\$83,233.44</i></b>
COMPUTER SYSTEM	1	IT	<b><i>\$1,573.01</i></b>
YELLOWFINS	1	STERIS	<b><i>\$4,950.00</i></b>
<b>TOTAL:</b>			<b><i>\$429,076.01</i></b>