

Oct 22 2024

STATE HEALTH PLANNING AND  
DEVELOPMENT AGENCY

1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

**September 30, 2024****Reviewability Determination Request – Cover Letter****Interior Renovations for Southeast Health 4<sup>TH</sup> Floor – East Wing****ATTN: Alabama State Health Planning and Development Agency**

To Whom It May Concern,

Southeast Health is submitting a Letter of Non Reviewability request for the project(s) specified below. Southeast Health is making this request due to recent changes in ADPH policy requiring either a CON or an LNR from SHPDA for all proposed projects. Southeast Health is applying for the LNR based on their position that all of the projects, both individually and collectively, meet the criteria specified in Ala. Admin Code r. 410-1-4-.01 (1)(j), "Notwithstanding any other provisions of these rules to the contrary, the modernization or construction of a non-clinical building, parking facility or any other non-institutional health services capital item on the existing campus of a health care facility shall be exempt from Certificate of Need review provided the construction or modernization does not allow the health care facility to provide any new institutional health services subject to review and not previously provided on a regular basis.". The request form(s) can be found following this page.

**Letter of Non Reviewability Request(s) Included:**

1. Interior Renovations for Southeast Health 4<sup>TH</sup> Floor – East Wing

Thank You,

**Brittney Pethel**

Assistant Project Manager – Support Services

Administration

Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

**September 30, 2024**

**Reviewability Determination Request**

**Project Title:** Interior Renovations for Southeast Health 4<sup>TH</sup> Floor – East Wing

**Architect:** G Mark Pepe Architects-Dothan Alabama

**Architect Project Number:** 23103

**Project Scope:**

Our East patient wing have 42 med-surge beds on the second through 7th floors. The finishes in the patient wing are at the end of life so every year or so we are cosmetically refurbishing the floors and making minor modifications in the support areas to improve efficiency for nursing and other support staff.

The fourth-floor patient wing consists of 13,800 square feet with 42 patient rooms, nursing station and support areas. This floor also contains our centralized telemetry monitoring area which will remain and be cosmetically refreshed.

On the fourth-floor east wing we will be replacing existing flooring with LVT plank flooring. We will be replacing acoustical ceiling tiles, installing new LED lay-in fixtures, replacing wall coverings and adding IPC wall protection sheets up to 48" above the floor.

We will be replacing all casework and we will be replacing the existing mosaic ceramic tile in the toilet rooms with new larger porcelain tile with 1/8" epoxy grout lines and install new plumbing fixtures.

**Reviewability Determination Request Information:**

- 1. Name of company seeking the reviewability determination.**

Southeast Health

- 2. Address and contact information for the authorized company representative seeking the determination.**

1108 Ross Clark Circle, Dothan Alabama 36301

- 3. Service area for the proposed service/equipment.**

Houston County, Alabama

- 4. Any new/additional services to be provided under the proposed project.**

None – existing patient med-surg wing

- 5. Approximated costs of the proposed project for:**

- a. Equipment** None – existing to remain

- b. First year annual operating costs:** None – existing patient med-surg wing

- c. Capital costs, to include:**

- i. Leases** None

- ii. Land/Building costs** None

- iii. Construction costs** \$3.2 Million

- 6. Disclosure of financial interests in the entity requesting the reviewability determination held by any other healthcare facilities or groups.** None

**7. Affirmation of Requesting Party:**

The undersigned, being first duly sworn, hereby make oath or affirm that he/she is [include position with entity requesting the determination], has knowledge of the facts in this request, and to the best of his/her/their information, knowledge and belief, such facts are true and correct.

Affiant

David Miller, CEO

(SEAL)

SUBSCRIBED AND SWORN to before me this 14<sup>th</sup> day of October

Cynthia Saison Clements  
Notary Public

My commission expires

1-14-25



**Nov 07 2024**



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

**September 30, 2024**

**Reviewability Determination Request – Cover Letter**

**Interior Renovations for Southeast Health 4<sup>TH</sup> Floor – East Wing**

**ATTN: Alabama State Health Planning and Development Agency**

To Whom It May Concern,

Southeast Health is submitting a Letter of Non Reviewability request for the project(s) specified below. Southeast Health is making this request due to recent changes in ADPH policy requiring either a CON or an LNR from SHPDA for all proposed projects. Southeast Health is applying for the LNR based on their position that all of the projects, both individually and collectively, meet the criteria specified in Ala. Admin Code r. 410-1-4-.01 (1)(j), "Notwithstanding any other provisions of these rules to the contrary, the modernization or construction of a non-clinical building, parking facility or any other non-institutional health services capital item on the existing campus of a health care facility shall be exempt from Certificate of Need review provided the construction or modernization does not allow the health care facility to provide any new institutional health services subject to review and not previously provided on a regular basis.". The request form(s) can be found following this page.

**Letter of Non Reviewability Request(s) Included:**

1. Interior Renovations for Southeast Health 4<sup>TH</sup> Floor – East Wing

Thank You,

**Brittney Pethel**

Assistant Project Manager – Support Services

Administration

Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

September 30, 2024

**Reviewability Determination Request**

**Project Title:** Interior Renovations for Southeast Health East Wing – 4<sup>th</sup> Floor

**Architect:** G Mark Pepe Architects-Dothan Alabama

**Architect Project Number:** 23103

**Project Scope:**

Southeast Health, owned by Houston County Healthcare Authority, is planning to make interior renovations on the 4<sup>th</sup> floor of our east patient wing in our main hospital located at 1108 Ross Clark Circle Dothan, Alabama 36301. There are 6 patient floors (2<sup>nd</sup>-7<sup>th</sup> floor) in our east patient wing, they each have 42 med-surge beds. We have been moving floor to floor updating the finishes as they are at the end of life, so every year or so we are cosmetically refurbishing a floor and making minor modifications in the support areas to improve efficiency for nursing and other support staff.

The next patient floor in line to be updated is the 4<sup>th</sup> floor. This floor consists of 13,800 square feet with 42 patient rooms, a nursing station, and support areas. We will be replacing existing flooring with LVT plank flooring, replacing acoustical ceiling tiles, installing new LED lay-in fixtures, updating all casework, replacing wall coverings while adding IPC wall protection sheets up to 48" above the floor. This will also include upgrading existing mosaic ceramic tile in the toilet rooms with new larger porcelain tile with 1/8" epoxy grout lines and installing new plumbing fixtures. This floor also contains our centralized telemetry monitoring area which will remain in place and be cosmetically refreshed. These renovations will not effect our total bed count.

**Reviewability Determination Request Information:**

1. **Name of company seeking the reviewability determination.**

Southeast Health

2. **Address and contact information for the authorized company representative seeking the determination.**

1108 Ross Clark Circle, Dothan Alabama 36301

3. **Service area for the proposed service/equipment.**

Houston County, Alabama

4. **Any new/additional services to be provided under the proposed project.**

None – existing patient med-surg wing

5. **Approximated costs of the proposed project for:**

a. **Equipment** None – existing to remain

b. **First year annual operating costs:** None – existing patient med-surg wing

c. **Capital costs, to include:**

i. **Leases** None

ii. **Land/Building costs** None

iii. **Construction costs** \$3.2 Million

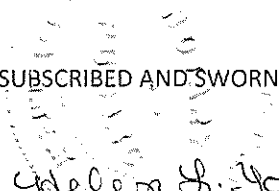
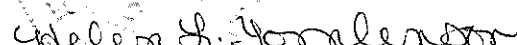
6. **Disclosure of financial interests in the entity requesting the reviewability determination held by any other healthcare facilities or groups.** None

**7. Affirmation of Requesting Party:**

The undersigned, being first duly sworn, hereby make oath or affirm that he/she is [include position with entity requesting the determination], has knowledge of the facts in this request, and to the best of his/her/their information, knowledge and belief, such facts are true and correct.

Affiant  (SEAL)

SUBSCRIBED AND SWORN to before me this 6th day of November 2024.

  
  
Notary Public

My commission expires 05/17/2027