




STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870
MONTGOMERY, ALABAMA 36104

MEMORANDUM

DATE : November 15, 2024
TO: All Interested Parties
FROM: Emily T. Marsal 
Executive Director
SUBJECT: Reviewability Determination Request (RV2025-011)

The attached request for a reviewability determination has been received. Any affected person may file written comments regarding this request, per 410-1-7-.02 of the *Alabama Certificate of Need Program Rules and Regulations*, by December 31, 2024.

Pursuant to ALA. ADMIN. CODE r 410-1-3-.09, all documents to be filed with the Agency must be submitted to shpda.online@shpda.alabama.gov in PDF, text searchable format.

Enclosure: see attached

RV2025-011
RECEIVED

Nov 07 2024



STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

Southeast
H E A L T H

1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

October 24, 2024 .

Reviewability Determination Request – Cover Letter

Interior Renovations for Southeast Health Non-Invasive Nuclear Cardiology

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 Non-Invasive Nuclear Cardiology

Thank You,

Brittney Pethel

Assistant Project Manager – Support Services

Administration

Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

October 24, 2024

Reviewability Determination Request

Project Title: Interior Renovations for Southeast Health Non-Invasive Nuclear Cardiology

Architect: Donofro Architects - Dothan Alabama

Project Scope:

Southeast Health, owned by Houston County Healthcare Authority, is planning to make interior renovations in the Non-Invasive Nuclear Cardiology Department at our main hospital located at 1108 Ross Clark Circle Dothan, Alabama 36301. This will include removing and replacing an older nuclear camera with a larger unit with the latest technology. The new camera is larger, so we will have to remove walls and reconfigure spaces for better flow in the department. We will also be taking some underutilized spaces and creating a clean supply room and relocating an existing ECHO Treadmill room. We will repurpose a small corner of the Heart and Vascular waiting room (located within the main hospital) to create four TVAR (Transcatheter aortic valve replacement) exam rooms, these rooms are used to evaluate patients to determine if they are candidates for a TVAR procedure. The finishes will all be similar or equal to the finishes that are adjacent to the construction zone and will blend aesthetically with existing finishes.

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

5. Approximated costs of the proposed project for:

a. Equipment: \$745,173

b. First year annual operating costs: \$715,545

c. Capital costs, to include:

i. Leases None

ii. Land/Building costs None

iii. Construction costs \$1,054,250.00

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