

RV2025-013
RECEIVED
Nov. 14, 2024
STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY



1108 Ross Clark Circle
Dothan, AL 36301
334-793-8111

October 28, 2024
Reviewability Determination Request – Cover Letter
First Floor Southeast Medicine Shop Relocation
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. First Floor Southeast Medicine Shop Relocation

Thank You,
Brittney Pethel
Assistant Project Manager – Support Services
Administration
Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

October 28, 2024

Reviewability Determination Request

Project Title: First Floor Southeast Medicine Shop Relocation

Architect: Goodwyn Mills Cawood

Project Scope:

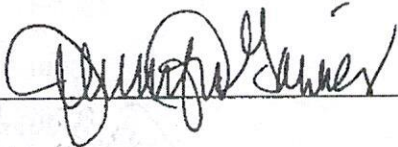
The Southeast Medicine Shop is currently located where our Emergency Department will be expanding so we need to relocate it. The new location will be on the first floor of our Outpatient building; it is a larger space that will provide more retail area for over the counter drugs, more storage, and larger work area for Pharmacists and Pharmacy Technicians. This is not a new service. There will be no new equipment associated with the relocation. The floor will have luxury vinyl plank and the walls will be painted. There will be new acoustical ceiling tiles and new 2x2 LED flat panel , lay-in light fixtures.

Reviewability Determination Request Information:

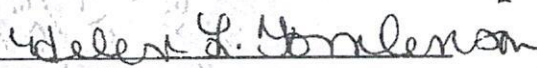
1. **Name of company seeking the reviewability determination.**
Southeast Health
2. **Address and contact information for the authorized company representative seeking the determination.**
1108 Ross Clark Circle, Dothan Alabama 36301
3. **Service area for the proposed service/equipment.**
Houston County, Alabama
4. **Any new/additional services to be provided under the proposed project.**
None
5. **Approximated costs of the proposed project for:**
 - a. **Equipment:** None
 - b. **First year annual operating costs:** \$15,000,000.00
 - c. **Capital costs, to include:**
 - i. **Leases** None
 - ii. **Land/Building costs** None
 - iii. **Construction costs** \$604,725.00
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 5th day of November, 2024

 My commission expires 05/17/2027
Notary Public

Dec 02 2024



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

October 28, 2024

Reviewability Determination Request – Cover Letter

First Floor Southeast Medicine Shop Relocation

ATTN: Alabama State Health Planning and Development Agency

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Letter of Non Reviewability Request(s) Included:

1. First Floor Southeast Medicine Shop Relocation

Thank You,

Brittney Pethel

Assistant Project Manager – Support Services

Administration

Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

October 28, 2024

Reviewability Determination Request

Project Title: First Floor Southeast Medicine Shop Relocation

Architect: Goodwyn Mills Cawood

Project Scope:

Southeast Health, owned by Houston County Healthcare Authority, is planning to relocate the Southeast Medicine shop. Southeast Medicine Shop is on the first floor of Southeast Health's main hospital located at 1108 Ross Clark Circle Dothan, Alabama 36301. The Southeast Medicine Shop is currently located in an area where Southeast Health's Emergency Department (also located on the first floor of Southeast Health's main hospital at 1108 Ross Clark Circle Dothan, Alabama 36301) will be expanding so it will have to be moved. Southeast Medicine Shop will remain on the first floor of Southeast Health's main hospital located at 1108 Ross Clark Circle Dothan, Alabama 36301; the new location is adjacent to Southeast Health's outpatient surgery lobby (also located on the first floor of the main hospital at 1108 Ross Clark Circle Dothan, Alabama 36301). The proposed location will accommodate a larger space that will provide more retail area for over the counter drugs, more storage, and a larger work area for Pharmacists and Pharmacy Technicians. This is not a new service. There will be no new equipment associated with the relocation. The floor will have luxury vinyl plank and the walls will be painted. There will be new acoustical ceiling tiles and new 2x2 LED flat panel, lay-in light 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

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

a. **Equipment:** None

b. **First year annual operating costs:** \$1,230,040.86

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

i. **Leases** None

ii. **Land/Building costs** None

iii. **Construction costs** \$604,725.00

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

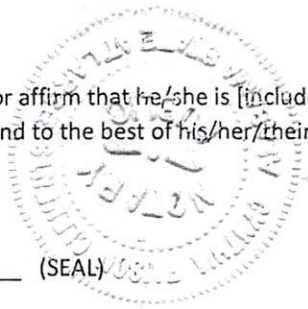
7. Affirmation of Requesting Party:

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

Richard A. [Signature]

(SEAL)



SUBSCRIBED AND SWORN to before me this

27th

day of

November, 2024

Cynthia Boisa-Camacho

Notary Public

My commission expires

4-14-25