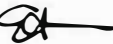




STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870
MONTGOMERY, ALABAMA 36104

MEMORANDUM

DATE : December 18, 2024
TO: All Interested Parties
FROM: Emily T. Marsal 
Executive Director
SUBJECT: Reviewability Determination Request (RV2025-014)

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 January 31, 2025.

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

Dec 16 2024



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

November 4, 2024**Reviewability Determination Request – Cover Letter****Outpatient Center CT Replacement – Southern Clinic****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. Outpatient Center CT Replacement – Southern Clinic

Thank You,

Brittney Pethel

Assistant Project Manager – Support Services

Administration

Southeast Health



1108 Ross Clark Circle

Dothan, AL 36301

334-793-8111

November 4, 2024

Reviewability Determination Request

Project Title: Outpatient Center CT Replacement – Southern Clinic

Project Scope:

Southeast Health, owned by Houston County Healthcare Authority, is located at 1108 Ross Clark Circle Dothan, Alabama 36301. Southeast Health is going to be replacing the CT equipment in our Outpatient Imaging Center within Southern Clinic (not owned by Southeast Health or Houston County Healthcare Authority). Southern Clinic is located at 201 Doctors Drive Dothan, Alabama 36301. This project includes removing the old CT equipment and replacing it with newer equipment. The new CT equipment will require more power than what is present, so the necessary power modifications will be made to accommodate the new unit. We will replace existing vinyl flooring with new LVT plank flooring, we will repaint walls, doors and trim & we will replace any damaged acoustical ceiling tiles. All of this work will take place in Southeast Health's Outpatient Imaging Center within Southern Clinic (not owned by Southeast Health or Houston County Healthcare Authority) located at 201 Doctors Drive Dothan, Alabama 36301.

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 \$641,000.00

b. First year annual operating costs: \$363,187.00

c. Capital costs, to include:

i. Leases \$57,997.00

ii. Land/Building costs None

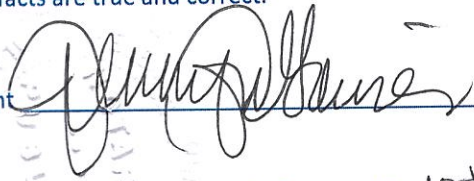
iii. Construction costs \$155,000.00

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 12th day of December, 2024



Notary Public

My commission expires 05 / 17 / 2027