

# **CERTIFICATE OF NEED UPDATE**

# South Carolina Department of Public Health September 2024

MATTER #	FACILITY	PROJECT DESCRIPTION	STATUS/CON #
3058	BAYADA Home Health Care, Inc. d/b/a BAYADA Home Health Care-Pickens 777 Lowndes Hill Road Suite 227 Greenville, S. C. 29607 (Pickens County) Contact: Toni Ann Messina, RN, Division Director (704) 720-4400 CON Reviewer: Jane Thoennes	Establishment of a Home Health Agency in Pickens County at a total project cost of \$60,000.00.	Approved 9/9/2024 SC-24-20
3059	BAYADA Home Health Care, Inc. d/b/a BAYADA Home Health Care-Lexington and Richland 220 Stoneridge Drive Columbia, S. C 29210 (Lexington and Richland Counties) Contact: Toni Ann Messina, RN, Division Director (704) 720-4400 CON Reviewer: Ashley Grant	Establishment of a Home Health Agency in Lexington and Richland Counties at a total project cost of \$121,843.00.	Approved 9/9/2024 SC-24-21
3060	Roper St. Francis Healthcare (RSFH) Ancillary Services d/b/a Roper St. Francis Home Health	Establishment of a new Home Health Agency in Berkeley, Charleston, and Dorchester	Approved 9/24/2024

	125 Doughty Street, Suite 760 Charleston, S. C. 29403 (Berkeley, Charleston, and Dorchester Counties) Contact: Troy Powell, OTR/L, MHA Vice President of Operations- Continuing Care (843) 724-2901 CON Reviewer: Jane Thoennes	Counties at a total project cost of \$50,000.00.	
3061	Medical University Hospital Authority d/b/a MUSC Health Mullins Nursing Center 22 Westedge Street, Suite 300 Charleston, S. C. 29403 (Marion County) Contact: Patrick Cawley, MD, CEO MUSC Health and Vice President for Health Affairs (843)792-4000 CON Reviewer: Dave Fiorini	Relocation of a nursing home to a facility requiring renovation and reduction of nursing homes for a total of 90 nursing home beds for a total project cost of \$13,680,944.00.	Approved 9/24/2024
3062	TSI South, LLC d/b/a Vital Care of Rock Hill 775 Addison Drive, Suite 110 Rock Hill, S. C. 29730 (York County) Contact: Marcie Parker, President (803) 881-1350 CON Reviewer: Ashley Grant	Establishment of a Specialty Home Health Agency to provide home infusion services in York County at a total project cost of \$13,000.00.	Deemed Complete 9/27/2024
3063	AnMed Encompass Health Rehabilitation Hospital, LLC d/b/a AnMed Health Rehabilitation Hospital, an Affiliate of AnMed Health and Encompass Health Corporation 1 Spring Back Way Anderson, S. C. 29621 (Anderson County)	Construction for the addition of 16 rehabilitation beds for a total of 76 rehabilitation beds and the addition of 11,405 sf at a total project cost of \$13,470,000.00.	Deemed Complete 9/27/2024

	Contact: Carey B. McRae, Esq., Associate General Counsel (205) 970-3442 CON Reviewer: Jane Thoennes		
3064	Masters Infusion LLC, d/b/a Vital Care of North Augusta 1201 W. Avenue North Augusta, S. C. 29841 (All 46 Counties) Contact: Courtney Knight, RN, MSN, Director of Nursing (803) 599-7386 CON Reviewer: Ashley Grant	Establishment of a Specialty Home Health Agency to provide home infusion services in all 46 Counties at a total project cost of \$21,945.00.	Deemed Accepted 9/27/2024
3065	PruittHealth-Conway, LLC d/b/a PruittHealth-Conway 1626 Jeurgens Court Norcross, GA 30093 (Horry County) Contact: Connor Seim, Director of Planning and Development (678) 533-6699 CON Reviewer: Dave Fiorini	Construction and relocation of a nursing home with 88 nursing home beds and the addition of 12 nursing home beds for a total of 100 nursing home beds at a total project cost of \$34,717,662.00.	Deemed Accepted 9/27/2024
3066	Orangeburg Community Healthcare, LLC d/b/a Oaks Post Acute 151 Lovely Circle Orangeburg, S. C. 29115 Contact: John Mitchell, Secretary (385) 988-3319 (Orangeburg County) CON Reviewer: Dave Fiorini	Renovation of an existing 122 bed nursing home facility and the addition of 42 nursing home beds for a total of 164 bed nursing home facility at a total project cost of \$800,909.00.	Deemed Accepted 9/27/2024

For more information about individual projects, please call (803) 545-4200 for the CON Reviewer listed.

#### **STATUS KEY**

Application Received- The date the application was received by the department with

the proof of publication and initial application fee.

Application Submitted- The date the application was received but does not meet all

filing requirements for the department to publish in the State

Register as accepted for filing.

Deemed Accepted- The date of publication in the State Register that an

application has been received by the department and deemed

"accepted for filing."

Deemed Complete- The date of publication in the *State Register* that an

application has been "deemed complete." The 90- or 120-day

review period begins on this date.

Under Review- The staff is reviewing the application.

Approved- The date a decision was made to approve the project.

Denied- The date a decision was made to deny the project.

Appealed- The decision has been appealed.

### **CON NOTES SEPTEMBER 2024**

# Certificate of Need (CON) Third (3<sup>rd</sup>) and Subsequent Extension Requests

The Department has developed a new process for CON third (3<sup>rd</sup>) and subsequent extension requests. After two (2) staff extensions have been granted, the CON holder may request CON 3<sup>rd</sup> and subsequent extension requests from CON staff. The CON 3<sup>rd</sup> and subsequent extension requests to the Department must be made at least three (3) months prior to the expiration of the CON and must contain justification for such extension. The CON staff will use S.C. Code Section 44-7-230(D) and Regulation 61-15, Sections 601, 602 and 603 to determine if the CON holder has extenuating circumstances beyond their control for the cause of the delay and demonstrated substantial progress as outlined in Regulation 61-15. CON staff will make an extension determination for up to a nine (9) month period. Upon CON staff determination, CON 3<sup>rd</sup> and subsequent extension requests will be submitted to Healthcare Quality's (HQ) Office of General Counsel (OGC) for review. HQ's OGC will review the CON staff determination and provide a response for CON staff. After receipt of HQ's OGC response, CON staff will render a decision of either:

- a. If approved, CON staff will prepare the issuance packet for a new CON expiration date of up to nine (9) months.
- b. If denied, CON staff will prepare a denial letter.

### **PROJECTS UNDER APPEAL**

The Department received a Consent Order of Dismissal for South of Broad Healthcare d/b/a South of Broad Hospital, Matter #2523, dated September 13, 2024. On September 16, 2024, the Department withdrew the prior decision granting the CON for Matter #2523. CON Matter #2523 is void.

## PROJECTS WHICH DO NOT REQUIRE CERTIFICATE OF NEED REVIEW EXEMPTIONS

For the Department to grant an exemption, the project must meet the requirements in Section 103 and be filed in accordance with Section 103 of Regulation No. 61-15.

# PROJECTS WHICH DO NOT REQUIRE CERTIFICATE OF NEED REVIEW NON-APPLICABILTY DETERMINATIONS

For a project to qualify for a non-applicability determination, it must not meet the Standards listed in Section 102 of Regulation No. 61-15 and be filed in accordance with Section 104 of Regulation No. 61-15.

#### **CON Staff**

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