

## **CERTIFICATE OF NEED UPDATE**

# South Carolina Department of Public Health April 2025

MATTER #	FACILITY	PROJECT DESCRIPTION	STATUS/CON #
3073	Trident Medical Center, LLC d/b/a Live Oak Mental Health & Wellness 9330 Medical Plaza Drive Charleston, S. C. 29406 Contact: Jeffrey L. Wilson, President/CEO (843) 847-4100 (Charleston County) CON Reviewer: Ashley Grant	The addition of 24 psychiatric beds for a total of 84 psychiatric beds at a total project cost of \$124,915.11.	Deemed Complete 4/25/2025  Deemed Complete 4/25/2025
3074	Novant Health Greenville Hospital, LLC d/b/a Novant Health Greenville Hospital 65 Fairchild Street, Suite 313B Daniel Island, S. C. 29492 Contact: Jason L. Bernd, Senior Vice President, President of South Carolina Region (843) 416-6210 (Greenville County) CON Reviewer: Jane Thoennes	The construction for the establishment of a new 20 general acute care bed hospital of 79,350 sf at a total project cost of \$132,134,992.52.	
3075	Integral Home Health d/b/a ViCare 59 Holly Ridge Lane West Columbia, S. C. 29169	The establishment of a Home Health Agency in Berkeley, Charleston, Richland, and Lexington Counties at a total project cost of \$5,000.00.	Deemed Complete 4/25/2025

	Contact: C. Colleen Stephens, President (888) 688-5249 (Berkeley, Charleston, Richland, and Lexington Counties) CON Reviewer: Dave Fiorini		
3076	Encompass Health Rehabilitation Hospital of Irmo, LLC d/b/a Encompass Health Rehabilitation Hospital of Irmo 9001 Liberty Parkway Birmingham, AL 35242 Contact: Susan S. Lyerly, Esq., National Director, Certificate of Need Program (205) 969-4528 (Richland County) CON Reviewer: Ashley Grant	The addition of 22 rehabilitation beds for a total of 49 rehabilitation beds at a total project cost of \$35,000.00.	Deemed Complete 4/25/2025
3077	Prisma Health-Upstate d/b/a Prisma Health Greer Memorial Hospital 300 East McBee Avenue, Suite 500 Greenville, S.C. 29601 Contact: Todd Walker, Greer Memorial Medical Campus, CEO (864) 797-7801 (Greenville County) CON Reviewer: Jane Thoennes	The addition of 69 acute care beds, 8 obstetric beds, 8 pediatric beds, and 8 ICU/CCU beds for a total of 175 beds with renovations at a total project cost of \$250,000,000.00.	Deemed Complete 4/25/2025
3078	Sumter Behavioral Health, LLC d/b/a Midlands Behavioral Health Hospital 3180 Broad Street Sumter, S.C. 29150 Contact: Rusty Flathmann, President (803) 911-4210	The addition of 28 psychiatric beds for a total of 60 psychiatric beds at a total project cost of \$36,678.00	Deemed Accepted 4/25/2025

	(Sumter County) Reviewer: Dave Fiorini		
3079	Ropheka Cares LLC d/b/a Ropheka Cares Home Health Agency 2037 St. Matthews Road Orangeburg, S.C. 29118 Contact: Florence Ogunkunle, CEO/Administrator (803) 515-4617 (Aiken, Charleston, Calhoun, Bamberg, Barnwell, Richland, Lexington, and Orangeburg Counties) Reviewer: Jane Thoennes	The establishment of a Home Health Agency in Aiken, Charleston, Calhoun, Bamberg, Barnwell, Richland, Lexington, and Orangeburg Counties at a total project cost of \$16,675.00.	Received 4/16/2025

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

# STATUS KEY

Application Received- Application Submitted-	The date the application was received by the department with the proof of publication and initial application fee.  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 <i>State Register</i> 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 APRIL 2025**

# 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 extension 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 outline 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.

The South Carolina Department of Public Health (SC DPH) will be closed the following dates in observance of several holidays. Please see below for the dates of closure:

- Friday, May 9, 2025, for the Confederate Memorial Day Holiday; normal operations will resume Monday, May 12, 2025
- Monday, May 26, 2025, for the Memorial Day Holiday; normal operations will resume Tuesday, May 27, 2025

Joint Annual Reports (JARs) for 2024 were released for completion and submission by hospitals, nursing care facilities, and ancillary facilities. Below are the due dates for each facility type.

Hospitals: Friday, June 13, 2025

Nursing Care Facilities: **Friday, June 20, 2025** Ancillary Facilities: **Friday, June 27, 2025** 

In preparation for Fiscal Year 2026, Nursing Home Administrators who currently hold a Medicaid Permit should be on the lookout for the Medicaid Patient Days Request Form. The Medicaid Patient Days Request form for FY2026 will be sent out around mid-May. Upon receipt, the form should be completed, indicating the specific number of Medicaid Patient Days that the nursing home wishes to provide during the period of July 1, 2025-June 30, 2026, and returned to the Department. The deadline for submittal of the completed request form is June 15, 2025.

The Certificate of Need (CON) Program has a **new USPS mailing address**. If you need to send USPS to the program, please use the new address listed below:

S.C. Department of Public Health Certificate of Need Program P.O. Box 2046 West Columbia, S.C. 29171

### The address for packages until further notice is:

Certificate of Need Program S.C. Department of Public Health 2100 Bull Street Columbia, S.C. 29201

#### **PROJECTS UNDER APPEAL**

The Department presently does not have any projects under appeal.

#### 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.

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