



CERTIFICATE OF NEED UPDATE

South Carolina Department of Public Health
May 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. | Under Review |
| 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. | Under Review |
| 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. | Under Review |

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| | <p>Contact: C. Colleen Stephens, President (888) 688-5249 (Berkeley, Charleston, Richland, and Lexington Counties) CON Reviewer: Dave Fiorini</p> | | |
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| 3076 | <p>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</p> | <p>The addition of 22 rehabilitation beds for a total of 49 rehabilitation beds at a total project cost of \$35,000.00.</p> | Under Review |
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| 3077 | <p>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</p> | <p>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.</p> | Under Review |
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| 3078 | <p>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</p> | <p>The addition of 28 psychiatric beds for a total of 60 psychiatric beds at a total project cost of \$36,678.00</p> | Deemed Complete 5/23/2025 |

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| | (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, Bamberg, Barnwell, Calhoun, Charleston, Lexington, Orangeburg, and Richland Counties at a total project cost of \$16,675.00. | Deemed Accepted 5/23/2025 |
| 3080 | Care Faith, LLC d/b/a Care Faith 661 South Aline Street Florence, S.C. 29506 Contact: Shambreka Eaddy, LPN-Project Manager (843) 758-2454 (Florence County) Reviewer: Dave Fiorini | The establishment of a Home Health Agency in Florence County at a total project cost of \$3,000.00. | Received 5/14/2025 |
| 3081 | Inspirium Health, LLC d/b/a Interim Healthcare of the Midlands 100 Verdae Boulevard, Suite 200 Greenville, S.C. 29607 Contact: Beth Landry, CEO (864) 627-1200 (Bamberg, Calhoun, Lexington, Orangeburg, and Richland Counties) Reviewer: Ashley Grant | The establishment of a Home Health Agency in Bamberg, Calhoun, Lexington, Orangeburg, and Richland Counties at a total project cost of \$15,500.00. | Received 5/19/2025 |
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For more information about individual projects, please call (803) 545-4200 for the CON Reviewer listed.

STATUS KEY

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| 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 <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 MAY 2025

Certificate of Need (CON) Third (3rd) and Subsequent Extension Requests

The Department has developed a new process for CON Third (3rd) and subsequent extension requests. After two (2) staff extension have been granted, the CON holder may request CON 3rd and subsequent extension requests from CON staff. The CON 3rd 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 3rd 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.

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**

Nursing Home Administrators:

On May 15, 2025, the FY 2026 Medicaid Permit Memorandum Cover and the FY 2026 Medicaid Permit Request Form were sent to current nursing home Medicaid Permit holders. Upon receipt, the forms should be completed, indicating the specific number of Medicaid Patient Days that the nursing home wishes to provide during the time 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**. You may choose to complete the form by clicking [here](#). Last year, the average time to complete the form through the link was 9 minutes and 17 seconds. If you have already completed and submitted your FY2026 Medicaid Permit Request Form, the Department thanks you in advance.

The Certificate of Need (CON) Program will present a Question & Answer session on the new web-based CON application, going live on Tuesday, July 1, 2025. These sessions are for hospitals, nursing homes, home health agencies, and in-home care providers that are considering expanding services to become a home health agency. We hope that you will join us during one of the sessions listed below.

Tuesday, June 17, 2025 12:00 noon to 1:00 pm

Thursday, June 19, 2025 10:00 am to 11:00 am

Thursday, June 19, 2025 2:00 pm to 3:00 pm

Information on the new web-based CON application can be accessed here: [Access the Web-Based CON Application Instructions](#)

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 Certificate of Need (CON) Program has a **new mailing address for packages** (i.e. UPS, FedEx, DHL, etc.). Please use the new address below for packages:

Certificate of Need Program, S.C. Department of Public Health
Building E Loading Dock
400 Otarre Parkway
Cayce, S.C. 29033

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-APPLICABILITY 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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| Dave Fiorini Senior Consultant | 803-545-4077 | fiorindn@dph.sc.gov |
| Ashley Grant Senior Consultant | 803-545-3028 | grantac@dph.sc.gov |
| Jane Thoennes Project Manager I | 803-545-3495 | thoennjh@dph.sc.gov |