

Waller Lansden Dortch & Davis, LLP 1901 Sixth Avenue North Suite 1400 Birmingham, AL 35203-2623

Christopher Thompson Chris.Thompson@wallerlaw.com 205.214.6380 main fax wallerlaw.com

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Oct 10 2019

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

October 10, 2019

VIA EMAIL [SHPDA.ONLINE@SHPDA.ALABAMA.GOV]

Hon. Emily T. Marsal, Executive Director State Health Planning and Development Agency 100 North Union Street RSA Union Building, Suite 870 Montgomery, Alabama 36130-3025

Re: Non-Reviewability Determination Request - Notice of Reactivation of Cath Lab Room Provider: The Health Care Authority of the City of Anniston d/b/a Northeast Alabama Regional Medical Center, Facility ID: 015-6530070 Current Address: 400 E. 10th Street, Anniston, AL 36207

Dear Ms. Marsal:

We are writing to submit a reviewability determination request (this "Request") in accordance with Section 410-1-7-.02 of the Alabama State Health Planning and Development Agency's ("SHPDA's") certificate of need ("CON") program rules and regulations with regard to the reactivation of a room used for cardiac catheterization procedures in order to replace an aging cardiac catheterization laboratory (a "Cath Lab") located at The Health Care Authority of the City of Anniston d/b/a Northeast Alabama Regional Medical Center (the "Hospital").

Specifically, we request a determination of non-reviewability with respect to the reactivation of a Cath Lab (the "Project"). We note that the Project would not entail offering any new health services or establishing new facilities. A description of facts relevant to the Project and an analysis of applicable CON law considerations in support of the Request follows.

- 1. Description of the Project. The Hospital currently holds a CON for three Cath Labs. Due to the Hospital's desire to update and improve one of its historic Cath Labs, the Hospital seeks to reactivate a laboratory room to serve as the refurbished Cath Lab. The Hospital seeks to do so by purchasing and installing current equipment and technology in the room. The Hospital also operates another Cath Lab, and therefore the Project does not involve the addition of any procedures which are not currently provided at the Hospital.
 - 2. Legal Analysis. We note that the Project:
 - a) does not involve the construction, development, acquisition, or other establishment of a new health care facility; involves the purchase of new major medical equipment in an amount estimated to be \$643,049.70; represents an increase in annual operating cost of approximately \$50,000; and involves less than \$307,040 in other capital expenditures; and
 - b) does not involve any new or additional services to be provided by the Hospital.

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Based on the foregoing information, we respectfully request that SHPDA grant a determination of non-reviewability for the Project. An attestation from the requesting party is enclosed herein, and we are submitting the required filing fee electronically. Please do not hesitate to contact me at Chris.Thompson@wallerlaw.com or (205) 226-5739 if you require any further information or have any questions.

Very truly yours,

Christopher Thompson

Affirmation of Requesting Party:

of The Health Care Authority of the City of Anniston d/b/a Northeast Alabama Regional Medical Center, 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 Tripp Johnson (SEAL) (SEAL) APY PUBLICATION OF A RAMINING SEAL ARAMINING SEAL
knowledge and belief, such facts are true and correct. Affiant Tripp Johnson (SEAL)
Affiant Tripp Johnson MARY 2, Commission (SEAL)
SUBSCRIBED AND SWORN to before me this day of October 2014 minimum
day of day of 2019!!!!!!!
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Notary Public
My commission expires: $400.21,2001$