



Dialysis Clinic, Inc.
A Non-Profit Corporation

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Feb 07 2020

STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

February 7, 2020

Via Overnight Delivery

Emily T. Marsal, Esq.
Executive Director
State Health Planning & Development Agency
100 North Union Street, Suite 870
Montgomery, AL 36104

Re: Non-Reviewability Determination Request
• **Dialysis Clinic, Inc.**

Dear Ms. Marsal:

I am writing to request, pursuant to Section 410-1-7-.02 of the Alabama Certificate of Need Program Rules and Regulations and Alabama Code § 22-21-260 et seq., your determination that Dialysis Clinic, Inc. may establish and operate a new four (4) station home training dialysis facility (the "Proposed Facility") in Florence, Alabama, located in Lauderdale County, without requiring Certificate of Need ("CON") review. Attached is a check for \$1,000.00 in payment for the applicable fee. To assist with your determination, we offer the following information:

The capital costs, including lease costs, of the Proposed Facility will not exceed \$400,000.00. The total cost of major medical equipment is not estimated to exceed \$100,000.00. The first year annual operating costs are estimated to be less than \$350,000.00.

Pursuant to Ala. Code § 22-21-278(b), a dialysis facility located in a Class 3, 4, 5, 6, 7, or 8 municipality, as defined by Ala. Code § 11-40-12(a), which contains no more than ten (10) freestanding hemodialysis stations is not subject to CON review. However, pursuant to Ala. Code § 22-21-278(c), this exemption from CON review does not apply to a dialysis facility located in a Class 4, 5, 6, 7, or 8 municipality if such municipality, or any part of such municipality, is located in a county in which a Class 1, 2, or 3 municipality, or any part thereof, is located.

The location for the Proposed Facility is in Lauderdale County, Alabama, which does not contain a Class 1, 2, or 3 municipality. Therefore, the Proposed Facility meets the exemption criteria set forth in Ala. Code § 22-21-278(b) and a CON is not required for the project.

Based upon the above, we respectfully request your determination that the Proposed Facility is exempt from CON review. Please feel free to contact me at (615) 963-9652 or anna.long-humphrey@dcinc.org if you have any questions regarding this matter.

Very Truly Yours,

Anna Long-Humphrey
Corporate Counsel

Enclosure

Affirmation of Requesting Party:

The undersigned, being first duly sworn, hereby make oath or affirm that he is President of Dialysis Clinic, Inc., has knowledge of the facts in this request, and to the best of his information, knowledge and belief, such facts are true and correct.

Affiant: Bill Wood (SEAL)

SUBSCRIBED AND SWORN to before me this 7th day of February.

Karen A. Gates
Notary Public

My Commission Expires: 7/3/2023

