

By: Representatives Yancey, Williamson

To: Public Health and Human Services

HOUSE BILL NO. 678

1 AN ACT TO BE KNOWN AS THE MISSISSIPPI ACCESS TO HEALTH CARE
 2 ACT; TO AMEND SECTIONS 41-7-173, 41-7-185, 41-7-187, 41-7-189,
 3 41-7-190, 41-7-191, 41-7-193, 41-7-197, 41-7-201, 41-7-202 AND
 4 41-7-207, MISSISSIPPI CODE OF 1972, TO REVISE THE HEALTH CARE
 5 CERTIFICATE OF NEED LAW TO REMOVE HEALTH CARE SERVICES AND
 6 EQUIPMENT FROM THE REQUIREMENT FOR THE ISSUANCE OF A CERTIFICATE
 7 OF NEED, SO THAT ONLY HEALTH CARE FACILITIES WILL REQUIRE
 8 CERTIFICATE OF NEED REVIEW; TO AMEND SECTION 41-73-5, MISSISSIPPI
 9 CODE OF 1972, TO CONFORM TO THE PRECEDING PROVISIONS; AND FOR
 10 RELATED PURPOSES.

11 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

12 **SECTION 1.** This act shall be known and may be cited as the
 13 Mississippi Access to Health Care Act.

14 **SECTION 2.** Section 41-7-173, Mississippi Code of 1972, is
 15 amended as follows:

16 41-7-173. For the purposes of Section 41-7-171 et seq., the
 17 following words shall have the meanings ascribed herein, unless
 18 the context otherwise requires:

19 (a) "Affected person" means (i) the applicant; (ii) a
 20 person residing within the geographic area to be served by the
 21 applicant's proposal; (iii) a person who regularly uses health
 22 care facilities or HMOs located in the geographic area of the



23 proposal which provide similar service to that which is proposed;
24 (iv) health care facilities and HMOs which have, prior to receipt
25 of the application under review, formally indicated an intention
26 to provide service similar to that of the proposal being
27 considered at a future date; (v) third-party payers who reimburse
28 health care facilities located in the geographical area of the
29 proposal; or (vi) any agency that establishes rates for health
30 care services or HMOs located in the geographic area of the
31 proposal.

32 (b) "Certificate of need" means a written order of the
33 State Department of Health setting forth the affirmative finding
34 that a proposal in prescribed application form, sufficiently
35 satisfies the plans, standards and criteria prescribed for * * *
36 the project by Section 41-7-171 et seq., and by rules and
37 regulations promulgated * * * under those sections by the State
38 Department of Health.

39 * * *

40 (* * * c) "Commencement of construction" means that all
41 of the following have been completed with respect to a proposal or
42 project proposing construction, renovating, remodeling or
43 alteration:

44 (i) A legally binding written contract has been
45 consummated by the proponent and a lawfully licensed contractor to
46 construct and/or complete the intent of the proposal within a
47 specified period of time in accordance with final architectural



48 plans which have been approved by the licensing authority of the
49 State Department of Health;

50 (ii) Any and all permits and/or approvals deemed
51 lawfully necessary by all authorities with responsibility for such
52 have been secured; and

53 (iii) Actual bona fide undertaking of the subject
54 proposal has commenced, and a progress payment of at least one
55 percent (1%) of the total cost price of the contract has been paid
56 to the contractor by the proponent, and the requirements of this
57 paragraph (e) have been certified to in writing by the State
58 Department of Health.

59 Force account expenditures, such as deposits, securities,
60 bonds, et cetera, may, in the discretion of the State Department
61 of Health, be excluded from any or all of the provisions of
62 defined commencement of construction.

63 (* * * d) "Consumer" means an individual who is not a
64 provider of health care as defined in paragraph (* * * j) of this
65 section.

66 * * *

67 (* * * e) "Health care facility" includes hospitals,
68 psychiatric hospitals, chemical dependency hospitals, skilled
69 nursing facilities, end-stage renal disease (ESRD) facilities,
70 including freestanding hemodialysis units, intermediate care
71 facilities, ambulatory surgical facilities, intermediate care
72 facilities for the * * * intellectually disabled, home health



73 agencies, psychiatric residential treatment facilities, pediatric
74 skilled nursing facilities, long-term care hospitals,
75 comprehensive medical rehabilitation facilities, including
76 facilities owned or operated by the state or a political
77 subdivision or instrumentality of the state, but does not include
78 Christian Science sanatoriums operated or listed and certified by
79 the First Church of Christ, Scientist, Boston, Massachusetts.
80 This definition shall not apply to facilities for the private
81 practice, either independently or by incorporated medical groups,
82 of physicians, dentists or health care professionals except where
83 such facilities are an integral part of an institutional health
84 service. The various health care facilities listed in this
85 paragraph shall be defined as follows:

86 (i) "Hospital" means an institution which is
87 primarily engaged in providing to inpatients, by or under the
88 supervision of physicians, diagnostic services and therapeutic
89 services for medical diagnosis, treatment and care of injured,
90 disabled or sick persons, or rehabilitation services for the
91 rehabilitation of injured, disabled or sick persons. Such term
92 does not include psychiatric hospitals.

93 (ii) "Psychiatric hospital" means an institution
94 which is primarily engaged in providing to inpatients, by or under
95 the supervision of a physician, psychiatric services for the
96 diagnosis and treatment of persons with mental illness.



97 (iii) "Chemical dependency hospital" means an
98 institution which is primarily engaged in providing to inpatients,
99 by or under the supervision of a physician, medical and related
100 services for the diagnosis and treatment of chemical dependency
101 such as alcohol and drug abuse.

102 (iv) "Skilled nursing facility" means an
103 institution or a distinct part of an institution which is
104 primarily engaged in providing to inpatients skilled nursing care
105 and related services for patients who require medical or nursing
106 care or rehabilitation services for the rehabilitation of injured,
107 disabled or sick persons.

108 (v) "End-stage renal disease (ESRD) facilities"
109 means kidney disease treatment centers, which includes
110 freestanding hemodialysis units and limited care facilities. The
111 term "limited care facility" generally refers to an
112 off-hospital-premises facility, regardless of whether it is
113 provider or nonprovider operated, which is engaged primarily in
114 furnishing maintenance hemodialysis services to stabilized
115 patients.

116 (vi) "Intermediate care facility" means an
117 institution which provides, on a regular basis, health-related
118 care and services to individuals who do not require the degree of
119 care and treatment which a hospital or skilled nursing facility is
120 designed to provide, but who, because of their mental or physical



121 condition, require health-related care and services (above the
122 level of room and board).

123 (vii) "Ambulatory surgical facility" means a
124 facility primarily organized or established for the purpose of
125 performing surgery for outpatients and is a separate identifiable
126 legal entity from any other health care facility. Such term does
127 not include the offices of private physicians or dentists, whether
128 for individual or group practice, and does not include any
129 abortion facility as defined in Section 41-75-1(f).

130 (viii) "Intermediate care facility for the * * *
131 intellectually disabled" means an intermediate care facility that
132 provides health or rehabilitative services in a planned program of
133 activities to persons with an intellectual disability, also
134 including, but not limited to, cerebral palsy and other conditions
135 covered by the Federal Developmentally Disabled Assistance and
136 Bill of Rights Act, Public Law 94-103.

137 (ix) "Home health agency" means a public or
138 privately owned agency or organization, or a subdivision of such
139 an agency or organization, properly authorized to conduct business
140 in Mississippi, which is primarily engaged in providing to
141 individuals at the written direction of a licensed physician, in
142 the individual's place of residence, skilled nursing services
143 provided by or under the supervision of a registered nurse
144 licensed to practice in Mississippi, and one or more of the
145 following services or items:



- 146 1. Physical, occupational or speech therapy;
147 2. Medical social services;
148 3. Part-time or intermittent services of a
149 home health aide;
150 4. Other services as approved by the
151 licensing agency for home health agencies;
152 5. Medical supplies, other than drugs and
153 biologicals, and the use of medical appliances; or
154 6. Medical services provided by an intern or
155 resident-in-training at a hospital under a teaching program of
156 such hospital.

157 Further, all skilled nursing services and those services
158 listed in items 1 through 4 of this subparagraph (ix) must be
159 provided directly by the licensed home health agency. For
160 purposes of this subparagraph, "directly" means either through an
161 agency employee or by an arrangement with another individual not
162 defined as a health care facility.

163 This subparagraph (ix) shall not apply to health care
164 facilities which had contracts for the above services with a home
165 health agency on January 1, 1990.

166 (x) "Psychiatric residential treatment facility"
167 means any nonhospital establishment with permanent licensed
168 facilities which provides a twenty-four-hour program of care by
169 qualified therapists, including, but not limited to, duly licensed
170 mental health professionals, psychiatrists, psychologists,



171 psychotherapists and licensed certified social workers, for
172 emotionally disturbed children and adolescents referred to such
173 facility by a court, local school district or by the Department of
174 Human Services, who are not in an acute phase of illness requiring
175 the services of a psychiatric hospital, and are in need of such
176 restorative treatment services. For purposes of this
177 subparagraph, the term "emotionally disturbed" means a condition
178 exhibiting one or more of the following characteristics over a
179 long period of time and to a marked degree, which adversely
180 affects educational performance:

181 1. An inability to learn which cannot be
182 explained by intellectual, sensory or health factors;

183 2. An inability to build or maintain
184 satisfactory relationships with peers and teachers;

185 3. Inappropriate types of behavior or
186 feelings under normal circumstances;

187 4. A general pervasive mood of unhappiness or
188 depression; or

189 5. A tendency to develop physical symptoms or
190 fears associated with personal or school problems. An
191 establishment furnishing primarily domiciliary care is not within
192 this definition.

193 (xi) "Pediatric skilled nursing facility" means an
194 institution or a distinct part of an institution that is primarily
195 engaged in providing to inpatients skilled nursing care and



196 related services for persons under twenty-one (21) years of age
197 who require medical or nursing care or rehabilitation services for
198 the rehabilitation of injured, disabled or sick persons.

199 (xii) "Long-term care hospital" means a
200 freestanding, Medicare-certified hospital that has an average
201 length of inpatient stay greater than twenty-five (25) days, which
202 is primarily engaged in providing chronic or long-term medical
203 care to patients who do not require more than three (3) hours of
204 rehabilitation or comprehensive rehabilitation per day, and has a
205 transfer agreement with an acute care medical center and a
206 comprehensive medical rehabilitation facility. Long-term care
207 hospitals shall not use rehabilitation, comprehensive medical
208 rehabilitation, medical rehabilitation, sub-acute rehabilitation,
209 nursing home, skilled nursing facility or sub-acute care facility
210 in association with its name.

211 (xiii) "Comprehensive medical rehabilitation
212 facility" means a hospital or hospital unit that is licensed
213 and/or certified as a comprehensive medical rehabilitation
214 facility which provides specialized programs that are accredited
215 by the Commission on Accreditation of Rehabilitation Facilities
216 and supervised by a physician board certified or board eligible in
217 physiatry or other doctor of medicine or osteopathy with at least
218 two (2) years of training in the medical direction of a
219 comprehensive rehabilitation program that:



- 220 1. Includes evaluation and treatment of
221 individuals with physical disabilities;
- 222 2. Emphasizes education and training of
223 individuals with disabilities;
- 224 3. Incorporates at least the following core
225 disciplines:
- 226 * * *a. Physical Therapy;
- 227 * * *b. Occupational Therapy;
- 228 * * *c. Speech and Language Therapy;
- 229 * * *d. Rehabilitation Nursing; and
- 230 4. Incorporates at least three (3) of the
231 following disciplines:
- 232 * * *a. Psychology;
- 233 * * *b. Audiology;
- 234 * * *c. Respiratory Therapy;
- 235 * * *d. Therapeutic Recreation;
- 236 * * *e. Orthotics;
- 237 * * *f. Prosthetics;
- 238 * * *g. Special Education;
- 239 * * *h. Vocational Rehabilitation;
- 240 * * *i. Psychotherapy;
- 241 * * *j. Social Work;
- 242 * * *k. Rehabilitation Engineering.



243 These specialized programs include, but are not limited to:
244 spinal cord injury programs, head injury programs and infant and
245 early childhood development programs.

246 (* * *f) "Health maintenance organization" or "HMO"
247 means a public or private organization organized under the laws of
248 this state or the federal government which:

249 (i) Provides or otherwise makes available to
250 enrolled participants health care services, including
251 substantially the following basic health care services: usual
252 physician services, hospitalization, laboratory, x-ray, emergency
253 and preventive services, and out-of-area coverage;

254 (ii) Is compensated (except for copayments) for
255 the provision of the basic health care services listed in
256 subparagraph (i) of this paragraph to enrolled participants on a
257 predetermined basis; and

258 (iii) Provides physician services primarily:

259 1. Directly through physicians who are either
260 employees or partners of such organization; or

261 2. Through arrangements with individual
262 physicians or one or more groups of physicians (organized on a
263 group practice or individual practice basis).

264 (* * *g) "Health service area" means a geographic area
265 of the state designated in the State Health Plan as the area to be
266 used in planning for specified health care facilities * * * and to



267 be used when considering certificate of need applications to
268 provide health care facilities * * *.

269 * * *

270 (* * *h) "State Department of Health" or "department"
271 shall mean the state agency created under Section 41-3-15 * * *.

272 * * *

273 (* * *i) "Person" means an individual, a trust or
274 estate, partnership, corporation (including associations,
275 joint-stock companies and insurance companies), the state or a
276 political subdivision or instrumentality of the state.

277 (* * *j) "Provider" shall mean any person who is a
278 provider or representative of a provider of health care * * *
279 requiring a certificate of need under Section 41-7-171 et seq., or
280 who has any financial or indirect interest in any provider
281 of * * * health care.

282 * * *

283 (* * *k) "Secretary" means the Secretary of Health and
284 Human Services, and any officer or employee of the Department of
285 Health and Human Services to whom the authority involved has been
286 delegated.

287 (* * *l) "State Health Plan" means the sole and
288 official statewide health plan for Mississippi * * * that
289 identifies priority state health needs and establishes standards
290 and criteria for health-related activities * * * that require
291 certificate of need review in compliance with Section 41-7-191.



292 * * *

293 **SECTION 3.** Section 41-7-185, Mississippi Code of 1972, is
294 amended as follows:

295 41-7-185. In carrying out its functions under Section
296 41-7-171 et seq., the State Department of Health is * * *
297 empowered to:

298 (a) Make applications for and accept funds from the
299 secretary and other federal and state agencies and to receive and
300 administer such other funds for the planning or provision of
301 health facilities or health care as are appropriate to the
302 accomplishment of the purposes of Section 41-7-171 et seq. * * *,
303 and to contract with the secretary to accept funds to administer
304 planning activities on the community, regional or state level;

305 (b) With the approval of the secretary, delegate to or
306 contract with any mutually agreeable department, division or
307 agency of the state, the federal government, or any political
308 subdivision of either, or any private corporation, organization or
309 association chartered by the Secretary of State of Mississippi,
310 authority for administering any programs, duties or functions
311 provided for in Section 41-7-171 * * * et seq.;

312 (c) Prescribe and promulgate such reasonable rules and
313 regulations as may be necessary to the implementation of the
314 purposes of Section 41-7-171 * * * et seq., complying with
315 Section * * * 25-43-1.101 et seq.;



316 (d) Require providers of * * * home health care
317 services provided through a home health agency and any other
318 provider of health care requiring a certificate of need to submit
319 or make available statistical information or such other
320 information requested by the State Department of Health, but not
321 information that would constitute an unwarranted invasion of the
322 personal privacy of any individual person or place the provider in
323 jeopardy of legal action by a third party;

324 (e) Conduct such other hearing or hearings in addition
325 to those provided for in Section 41-7-197, and enter such further
326 order or orders, and with approval of the Governor enter into such
327 agreement or agreements with the secretary as may be reasonably
328 necessary to the realization by the people of Mississippi of the
329 full benefits of Acts of Congress;

330 (f) In its discretion, contract with the secretary, or
331 terminate any such contract, for the administration of the
332 provisions, programs, duties and functions of Section 1122 of
333 Public Law 92-603; but the State Department of Health shall not be
334 relieved of matters of accountability, obligation or
335 responsibility that accrued to the department by virtue of prior
336 contracts and/or statutes;

337 (g) Prepare, review at least triennially, and revise,
338 as necessary, a State Health Plan, as defined in Section 41-7-173,
339 which shall be approved by the Governor before it becomes
340 effective.



341 **SECTION 4.** Section 41-7-187, Mississippi Code of 1972, is
342 amended as follows:

343 41-7-187. The State Department of Health is * * * authorized
344 to develop and implement a statewide health certificate of need
345 program. The State Department of Health is authorized and
346 empowered to adopt by rule and regulation:

347 (a) Criteria, standards and plans to be used in
348 evaluating applications for certificates of need;

349 (b) Effective standards to determine when a person,
350 facility or organization must apply for a certificate of need; and
351 * * *

352 (* * * c) Review procedures for conducting reviews of
353 applications for certificates of need.

354 **SECTION 5.** Section 41-7-189, Mississippi Code of 1972, is
355 amended as follows:

356 41-7-189. (1) * * * Before review of * * * proposals
357 requiring a certificate of need, the State Department of Health
358 shall disseminate to all health care facilities and health
359 maintenance organizations within the state, and shall publish in
360 one or more newspapers of general circulation in the state, a
361 description of the scope of coverage of the * * * certificate of
362 need program. Whenever the scope of such coverage is revised, the
363 State Department of Health shall disseminate and publish a revised
364 description thereof in like manner.



365 (2) Selected statistical data and information obtained by
366 the State Department of Health as the licensing agency for health
367 care facilities requiring licensure by the state and as the agency
368 which provides certification for the Medicaid and/or Medicare
369 program, may be utilized by the department in performing the
370 statutory duties imposed upon it by any law over which it has
371 authority, and regulations necessarily promulgated for such
372 facilities to participate in the Medicaid and/or Medicare
373 program; * * * however, * * * the names of individual patients
374 shall not be revealed except in hearings or judicial proceedings
375 regarding questions of licensure.

376 **SECTION 6.** Section 41-7-190, Mississippi Code of 1972, is
377 amended as follows:

378 41-7-190. No corporation, foreign or domestic, partnership,
379 individual(s) or association of such entities or of persons
380 whatsoever, or any combination thereof, shall own, possess or
381 exercise control over, in any manner, more than twenty percent
382 (20%) of the beds in health care facilities defined in Section
383 41-7-173(* * *e) (iv) and (vi) in the defined health service area
384 of the State of Mississippi.

385 Health care facilities owned, operated or under control of
386 the United States government, the state government or political
387 subdivision of either are excluded from the limitation of this
388 section.



389 **SECTION 7.** Section 41-7-191, Mississippi Code of 1972, is
390 amended as follows:

391 41-7-191. (1) No person shall engage in any of the
392 following activities without obtaining the required certificate of
393 need:

394 (a) The construction, development or other
395 establishment of a new health care facility, which establishment
396 shall include the reopening of a health care facility that has
397 ceased to operate for a period of sixty (60) months or more;

398 (b) The relocation of a health care facility or portion
399 thereof, * * * unless * * * the relocation of * * * the health
400 care facility or portion thereof * * * is within five thousand two
401 hundred eighty (5,280) feet from the main entrance of the health
402 care facility;

403 (c) Any change in the existing bed complement of any
404 health care facility through the addition or conversion of any
405 beds * * *; however, if a health care facility has voluntarily
406 delicensed some of its existing bed complement, it may later
407 relicense some or all of its delicensed beds without the necessity
408 of having to acquire a certificate of need. The State Department
409 of Health shall maintain a record of the delicensing health care
410 facility and its voluntarily delicensed beds and continue counting
411 those beds as part of the state's total bed count for health care
412 planning purposes. If a health care facility that has voluntarily
413 delicensed some of its beds later desires to relicense some or all



414 of its voluntarily delicensed beds, it shall notify the State
415 Department of Health of its intent to increase the number of its
416 licensed beds. The State Department of Health shall survey the
417 health care facility within thirty (30) days of that notice and,
418 if appropriate, issue the health care facility a new license
419 reflecting the new contingent of beds. However, in no event may a
420 health care facility that has voluntarily delicensed some of its
421 beds be reissued a license to operate beds in excess of its bed
422 count before the voluntary delicensure of some of its beds without
423 seeking certificate of need approval;

424 * * *

425 (* * *d) The contracting of a health care facility as
426 defined in subparagraphs (i) through (viii) of Section
427 41-7-173(* * *e) to establish a home office, subunit, or branch
428 office in the space operated as a health care facility through a
429 formal arrangement with an existing health care facility as
430 defined in subparagraph (ix) of Section 41-7-173(* * *e);

431 (* * *e) The replacement or relocation of a health
432 care facility designated as a critical access hospital shall be
433 exempt from subsection (1) of this section so long as the critical
434 access hospital complies with all applicable federal law and
435 regulations regarding such replacement or relocation;

436 (* * *f) Reopening a health care facility that has
437 ceased to operate for a period of sixty (60) months or more, which



438 reopening requires a certificate of need for the establishment of
439 a new health care facility.

440 (2) The State Department of Health shall not grant approval
441 for or issue a certificate of need to any person proposing the new
442 construction of, addition to, or expansion of any health care
443 facility defined in subparagraphs (iv) (skilled nursing facility)
444 and (vi) (intermediate care facility) of Section 41-7-173(* * *e)
445 or the conversion of vacant hospital beds to provide skilled or
446 intermediate nursing home care, except as hereinafter authorized:

447 (a) The department may issue a certificate of need to
448 any person proposing the new construction of any health care
449 facility defined in subparagraphs (iv) and (vi) of Section
450 41-7-173(h) as part of a life care retirement facility, in any
451 county bordering on the Gulf of Mexico in which is located a
452 National Aeronautics and Space Administration facility, not to
453 exceed forty (40) beds. From and after July 1, 1999, there shall
454 be no prohibition or restrictions on participation in the Medicaid
455 program (Section 43-13-101 et seq.) for the beds in the health
456 care facility that were authorized under this paragraph (a).

457 (b) The department may issue certificates of need in
458 Harrison County to provide skilled nursing home care for
459 Alzheimer's disease patients and other patients, not to exceed one
460 hundred fifty (150) beds. From and after July 1, 1999, there
461 shall be no prohibition or restrictions on participation in the



462 Medicaid program (Section 43-13-101 et seq.) for the beds in the
463 nursing facilities that were authorized under this paragraph (b).

464 (c) The department may issue a certificate of need for
465 the addition to or expansion of any skilled nursing facility that
466 is part of an existing continuing care retirement community
467 located in Madison County, provided that the recipient of the
468 certificate of need agrees in writing that the skilled nursing
469 facility will not at any time participate in the Medicaid program
470 (Section 43-13-101 et seq.) or admit or keep any patients in the
471 skilled nursing facility who are participating in the Medicaid
472 program. This written agreement by the recipient of the
473 certificate of need shall be fully binding on any subsequent owner
474 of the skilled nursing facility, if the ownership of the facility
475 is transferred at any time after the issuance of the certificate
476 of need. Agreement that the skilled nursing facility will not
477 participate in the Medicaid program shall be a condition of the
478 issuance of a certificate of need to any person under this
479 paragraph (c), and if such skilled nursing facility at any time
480 after the issuance of the certificate of need, regardless of the
481 ownership of the facility, participates in the Medicaid program or
482 admits or keeps any patients in the facility who are participating
483 in the Medicaid program, the State Department of Health shall
484 revoke the certificate of need, if it is still outstanding, and
485 shall deny or revoke the license of the skilled nursing facility,
486 at the time that the department determines, after a hearing



487 complying with due process, that the facility has failed to comply
488 with any of the conditions upon which the certificate of need was
489 issued, as provided in this paragraph and in the written agreement
490 by the recipient of the certificate of need. The total number of
491 beds that may be authorized under the authority of this paragraph
492 (c) shall not exceed sixty (60) beds.

493 (d) The State Department of Health may issue a
494 certificate of need to any hospital located in DeSoto County for
495 the new construction of a skilled nursing facility, not to exceed
496 one hundred twenty (120) beds, in DeSoto County. From and after
497 July 1, 1999, there shall be no prohibition or restrictions on
498 participation in the Medicaid program (Section 43-13-101 et seq.)
499 for the beds in the nursing facility that were authorized under
500 this paragraph (d).

501 (e) The State Department of Health may issue a
502 certificate of need for the construction of a nursing facility or
503 the conversion of beds to nursing facility beds at a personal care
504 facility for the elderly in Lowndes County that is owned and
505 operated by a Mississippi nonprofit corporation, not to exceed
506 sixty (60) beds. From and after July 1, 1999, there shall be no
507 prohibition or restrictions on participation in the Medicaid
508 program (Section 43-13-101 et seq.) for the beds in the nursing
509 facility that were authorized under this paragraph (e).

510 (f) The State Department of Health may issue a
511 certificate of need for conversion of a county hospital facility



512 in Itawamba County to a nursing facility, not to exceed sixty (60)
513 beds, including any necessary construction, renovation or
514 expansion. From and after July 1, 1999, there shall be no
515 prohibition or restrictions on participation in the Medicaid
516 program (Section 43-13-101 et seq.) for the beds in the nursing
517 facility that were authorized under this paragraph (f).

518 (g) The State Department of Health may issue a
519 certificate of need for the construction or expansion of nursing
520 facility beds or the conversion of other beds to nursing facility
521 beds in either Hinds, Madison or Rankin County, not to exceed
522 sixty (60) beds. From and after July 1, 1999, there shall be no
523 prohibition or restrictions on participation in the Medicaid
524 program (Section 43-13-101 et seq.) for the beds in the nursing
525 facility that were authorized under this paragraph (g).

526 (h) The State Department of Health may issue a
527 certificate of need for the construction or expansion of nursing
528 facility beds or the conversion of other beds to nursing facility
529 beds in either Hancock, Harrison or Jackson County, not to exceed
530 sixty (60) beds. From and after July 1, 1999, there shall be no
531 prohibition or restrictions on participation in the Medicaid
532 program (Section 43-13-101 et seq.) for the beds in the facility
533 that were authorized under this paragraph (h).

534 (i) The department may issue a certificate of need for
535 the new construction of a skilled nursing facility in Leake
536 County, provided that the recipient of the certificate of need



537 agrees in writing that the skilled nursing facility will not at
538 any time participate in the Medicaid program (Section 43-13-101 et
539 seq.) or admit or keep any patients in the skilled nursing
540 facility who are participating in the Medicaid program. This
541 written agreement by the recipient of the certificate of need
542 shall be fully binding on any subsequent owner of the skilled
543 nursing facility, if the ownership of the facility is transferred
544 at any time after the issuance of the certificate of need.
545 Agreement that the skilled nursing facility will not participate
546 in the Medicaid program shall be a condition of the issuance of a
547 certificate of need to any person under this paragraph (i), and if
548 such skilled nursing facility at any time after the issuance of
549 the certificate of need, regardless of the ownership of the
550 facility, participates in the Medicaid program or admits or keeps
551 any patients in the facility who are participating in the Medicaid
552 program, the State Department of Health shall revoke the
553 certificate of need, if it is still outstanding, and shall deny or
554 revoke the license of the skilled nursing facility, at the time
555 that the department determines, after a hearing complying with due
556 process, that the facility has failed to comply with any of the
557 conditions upon which the certificate of need was issued, as
558 provided in this paragraph and in the written agreement by the
559 recipient of the certificate of need. The provision of Section
560 41-7-193(1) regarding substantial compliance of the projection of
561 need as reported in the current State Health Plan is waived for



562 the purposes of this paragraph. The total number of nursing
563 facility beds that may be authorized by any certificate of need
564 issued under this paragraph (i) shall not exceed sixty (60) beds.
565 If the skilled nursing facility authorized by the certificate of
566 need issued under this paragraph is not constructed and fully
567 operational within eighteen (18) months after July 1, 1994, the
568 State Department of Health, after a hearing complying with due
569 process, shall revoke the certificate of need, if it is still
570 outstanding, and shall not issue a license for the skilled nursing
571 facility at any time after the expiration of the eighteen-month
572 period.

573 (j) The department may issue certificates of need to
574 allow any existing freestanding long-term care facility in
575 Tishomingo County and Hancock County that on July 1, 1995, is
576 licensed with fewer than sixty (60) beds. For the purposes of
577 this paragraph (j), the provisions of Section 41-7-193(1)
578 requiring substantial compliance with the projection of need as
579 reported in the current State Health Plan are waived. From and
580 after July 1, 1999, there shall be no prohibition or restrictions
581 on participation in the Medicaid program (Section 43-13-101 et
582 seq.) for the beds in the long-term care facilities that were
583 authorized under this paragraph (j).

584 (k) The department may issue a certificate of need for
585 the construction of a nursing facility at a continuing care
586 retirement community in Lowndes County. The total number of beds



587 that may be authorized under the authority of this paragraph (k)
588 shall not exceed sixty (60) beds. From and after July 1, 2001,
589 the prohibition on the facility participating in the Medicaid
590 program (Section 43-13-101 et seq.) that was a condition of
591 issuance of the certificate of need under this paragraph (k) shall
592 be revised as follows: The nursing facility may participate in
593 the Medicaid program from and after July 1, 2001, if the owner of
594 the facility on July 1, 2001, agrees in writing that no more than
595 thirty (30) of the beds at the facility will be certified for
596 participation in the Medicaid program, and that no claim will be
597 submitted for Medicaid reimbursement for more than thirty (30)
598 patients in the facility in any month or for any patient in the
599 facility who is in a bed that is not Medicaid-certified. This
600 written agreement by the owner of the facility shall be a
601 condition of licensure of the facility, and the agreement shall be
602 fully binding on any subsequent owner of the facility if the
603 ownership of the facility is transferred at any time after July 1,
604 2001. After this written agreement is executed, the Division of
605 Medicaid and the State Department of Health shall not certify more
606 than thirty (30) of the beds in the facility for participation in
607 the Medicaid program. If the facility violates the terms of the
608 written agreement by admitting or keeping in the facility on a
609 regular or continuing basis more than thirty (30) patients who are
610 participating in the Medicaid program, the State Department of
611 Health shall revoke the license of the facility, at the time that



612 the department determines, after a hearing complying with due
613 process, that the facility has violated the written agreement.

614 (l) Provided that funds are specifically appropriated
615 therefor by the Legislature, the department may issue a
616 certificate of need to a rehabilitation hospital in Hinds County
617 for the construction of a sixty-bed long-term care nursing
618 facility dedicated to the care and treatment of persons with
619 severe disabilities including persons with spinal cord and
620 closed-head injuries and ventilator dependent patients. The
621 provisions of Section 41-7-193(1) regarding substantial compliance
622 with projection of need as reported in the current State Health
623 Plan are waived for the purpose of this paragraph.

624 (m) The State Department of Health may issue a
625 certificate of need to a county-owned hospital in the Second
626 Judicial District of Panola County for the conversion of not more
627 than seventy-two (72) hospital beds to nursing facility beds,
628 provided that the recipient of the certificate of need agrees in
629 writing that none of the beds at the nursing facility will be
630 certified for participation in the Medicaid program (Section
631 43-13-101 et seq.), and that no claim will be submitted for
632 Medicaid reimbursement in the nursing facility in any day or for
633 any patient in the nursing facility. This written agreement by
634 the recipient of the certificate of need shall be a condition of
635 the issuance of the certificate of need under this paragraph, and
636 the agreement shall be fully binding on any subsequent owner of



637 the nursing facility if the ownership of the nursing facility is
638 transferred at any time after the issuance of the certificate of
639 need. After this written agreement is executed, the Division of
640 Medicaid and the State Department of Health shall not certify any
641 of the beds in the nursing facility for participation in the
642 Medicaid program. If the nursing facility violates the terms of
643 the written agreement by admitting or keeping in the nursing
644 facility on a regular or continuing basis any patients who are
645 participating in the Medicaid program, the State Department of
646 Health shall revoke the license of the nursing facility, at the
647 time that the department determines, after a hearing complying
648 with due process, that the nursing facility has violated the
649 condition upon which the certificate of need was issued, as
650 provided in this paragraph and in the written agreement. If the
651 certificate of need authorized under this paragraph is not issued
652 within twelve (12) months after July 1, 2001, the department shall
653 deny the application for the certificate of need and shall not
654 issue the certificate of need at any time after the twelve-month
655 period, unless the issuance is contested. If the certificate of
656 need is issued and substantial construction of the nursing
657 facility beds has not commenced within eighteen (18) months after
658 July 1, 2001, the State Department of Health, after a hearing
659 complying with due process, shall revoke the certificate of need
660 if it is still outstanding, and the department shall not issue a
661 license for the nursing facility at any time after the



662 eighteen-month period. However, if the issuance of the
663 certificate of need is contested, the department shall require
664 substantial construction of the nursing facility beds within six
665 (6) months after final adjudication on the issuance of the
666 certificate of need.

667 (n) The department may issue a certificate of need for
668 the new construction, addition or conversion of skilled nursing
669 facility beds in Madison County, provided that the recipient of
670 the certificate of need agrees in writing that the skilled nursing
671 facility will not at any time participate in the Medicaid program
672 (Section 43-13-101 et seq.) or admit or keep any patients in the
673 skilled nursing facility who are participating in the Medicaid
674 program. This written agreement by the recipient of the
675 certificate of need shall be fully binding on any subsequent owner
676 of the skilled nursing facility, if the ownership of the facility
677 is transferred at any time after the issuance of the certificate
678 of need. Agreement that the skilled nursing facility will not
679 participate in the Medicaid program shall be a condition of the
680 issuance of a certificate of need to any person under this
681 paragraph (n), and if such skilled nursing facility at any time
682 after the issuance of the certificate of need, regardless of the
683 ownership of the facility, participates in the Medicaid program or
684 admits or keeps any patients in the facility who are participating
685 in the Medicaid program, the State Department of Health shall
686 revoke the certificate of need, if it is still outstanding, and



687 shall deny or revoke the license of the skilled nursing facility,
688 at the time that the department determines, after a hearing
689 complying with due process, that the facility has failed to comply
690 with any of the conditions upon which the certificate of need was
691 issued, as provided in this paragraph and in the written agreement
692 by the recipient of the certificate of need. The total number of
693 nursing facility beds that may be authorized by any certificate of
694 need issued under this paragraph (n) shall not exceed sixty (60)
695 beds. If the certificate of need authorized under this paragraph
696 is not issued within twelve (12) months after July 1, 1998, the
697 department shall deny the application for the certificate of need
698 and shall not issue the certificate of need at any time after the
699 twelve-month period, unless the issuance is contested. If the
700 certificate of need is issued and substantial construction of the
701 nursing facility beds has not commenced within eighteen (18)
702 months after July 1, 1998, the State Department of Health, after a
703 hearing complying with due process, shall revoke the certificate
704 of need if it is still outstanding, and the department shall not
705 issue a license for the nursing facility at any time after the
706 eighteen-month period. However, if the issuance of the
707 certificate of need is contested, the department shall require
708 substantial construction of the nursing facility beds within six
709 (6) months after final adjudication on the issuance of the
710 certificate of need.



711 (o) The department may issue a certificate of need for
712 the new construction, addition or conversion of skilled nursing
713 facility beds in Leake County, provided that the recipient of the
714 certificate of need agrees in writing that the skilled nursing
715 facility will not at any time participate in the Medicaid program
716 (Section 43-13-101 et seq.) or admit or keep any patients in the
717 skilled nursing facility who are participating in the Medicaid
718 program. This written agreement by the recipient of the
719 certificate of need shall be fully binding on any subsequent owner
720 of the skilled nursing facility, if the ownership of the facility
721 is transferred at any time after the issuance of the certificate
722 of need. Agreement that the skilled nursing facility will not
723 participate in the Medicaid program shall be a condition of the
724 issuance of a certificate of need to any person under this
725 paragraph (o), and if such skilled nursing facility at any time
726 after the issuance of the certificate of need, regardless of the
727 ownership of the facility, participates in the Medicaid program or
728 admits or keeps any patients in the facility who are participating
729 in the Medicaid program, the State Department of Health shall
730 revoke the certificate of need, if it is still outstanding, and
731 shall deny or revoke the license of the skilled nursing facility,
732 at the time that the department determines, after a hearing
733 complying with due process, that the facility has failed to comply
734 with any of the conditions upon which the certificate of need was
735 issued, as provided in this paragraph and in the written agreement



736 by the recipient of the certificate of need. The total number of
737 nursing facility beds that may be authorized by any certificate of
738 need issued under this paragraph (o) shall not exceed sixty (60)
739 beds. If the certificate of need authorized under this paragraph
740 is not issued within twelve (12) months after July 1, 2001, the
741 department shall deny the application for the certificate of need
742 and shall not issue the certificate of need at any time after the
743 twelve-month period, unless the issuance is contested. If the
744 certificate of need is issued and substantial construction of the
745 nursing facility beds has not commenced within eighteen (18)
746 months after July 1, 2001, the State Department of Health, after a
747 hearing complying with due process, shall revoke the certificate
748 of need if it is still outstanding, and the department shall not
749 issue a license for the nursing facility at any time after the
750 eighteen-month period. However, if the issuance of the
751 certificate of need is contested, the department shall require
752 substantial construction of the nursing facility beds within six
753 (6) months after final adjudication on the issuance of the
754 certificate of need.

755 (p) The department may issue a certificate of need for
756 the construction of a municipally owned nursing facility within
757 the Town of Belmont in Tishomingo County, not to exceed sixty (60)
758 beds, provided that the recipient of the certificate of need
759 agrees in writing that the skilled nursing facility will not at
760 any time participate in the Medicaid program (Section 43-13-101 et



761 seq.) or admit or keep any patients in the skilled nursing
762 facility who are participating in the Medicaid program. This
763 written agreement by the recipient of the certificate of need
764 shall be fully binding on any subsequent owner of the skilled
765 nursing facility, if the ownership of the facility is transferred
766 at any time after the issuance of the certificate of need.
767 Agreement that the skilled nursing facility will not participate
768 in the Medicaid program shall be a condition of the issuance of a
769 certificate of need to any person under this paragraph (p), and if
770 such skilled nursing facility at any time after the issuance of
771 the certificate of need, regardless of the ownership of the
772 facility, participates in the Medicaid program or admits or keeps
773 any patients in the facility who are participating in the Medicaid
774 program, the State Department of Health shall revoke the
775 certificate of need, if it is still outstanding, and shall deny or
776 revoke the license of the skilled nursing facility, at the time
777 that the department determines, after a hearing complying with due
778 process, that the facility has failed to comply with any of the
779 conditions upon which the certificate of need was issued, as
780 provided in this paragraph and in the written agreement by the
781 recipient of the certificate of need. The provision of Section
782 41-7-193(1) regarding substantial compliance of the projection of
783 need as reported in the current State Health Plan is waived for
784 the purposes of this paragraph. If the certificate of need
785 authorized under this paragraph is not issued within twelve (12)



786 months after July 1, 1998, the department shall deny the
787 application for the certificate of need and shall not issue the
788 certificate of need at any time after the twelve-month period,
789 unless the issuance is contested. If the certificate of need is
790 issued and substantial construction of the nursing facility beds
791 has not commenced within eighteen (18) months after July 1, 1998,
792 the State Department of Health, after a hearing complying with due
793 process, shall revoke the certificate of need if it is still
794 outstanding, and the department shall not issue a license for the
795 nursing facility at any time after the eighteen-month period.
796 However, if the issuance of the certificate of need is contested,
797 the department shall require substantial construction of the
798 nursing facility beds within six (6) months after final
799 adjudication on the issuance of the certificate of need.

800 (q) (i) Beginning on July 1, 1999, the State
801 Department of Health shall issue certificates of need during each
802 of the next four (4) fiscal years for the construction or
803 expansion of nursing facility beds or the conversion of other beds
804 to nursing facility beds in each county in the state having a need
805 for fifty (50) or more additional nursing facility beds, as shown
806 in the fiscal year 1999 State Health Plan, in the manner provided
807 in this paragraph (q). The total number of nursing facility beds
808 that may be authorized by any certificate of need authorized under
809 this paragraph (q) shall not exceed sixty (60) beds.



810 (ii) Subject to the provisions of subparagraph
811 (v), during each of the next four (4) fiscal years, the department
812 shall issue six (6) certificates of need for new nursing facility
813 beds, as follows: During fiscal years 2000, 2001 and 2002, one
814 (1) certificate of need shall be issued for new nursing facility
815 beds in the county in each of the four (4) Long-Term Care Planning
816 Districts designated in the fiscal year 1999 State Health Plan
817 that has the highest need in the district for those beds; and two
818 (2) certificates of need shall be issued for new nursing facility
819 beds in the two (2) counties from the state at large that have the
820 highest need in the state for those beds, when considering the
821 need on a statewide basis and without regard to the Long-Term Care
822 Planning Districts in which the counties are located. During
823 fiscal year 2003, one (1) certificate of need shall be issued for
824 new nursing facility beds in any county having a need for fifty
825 (50) or more additional nursing facility beds, as shown in the
826 fiscal year 1999 State Health Plan, that has not received a
827 certificate of need under this paragraph (q) during the three (3)
828 previous fiscal years. During fiscal year 2000, in addition to
829 the six (6) certificates of need authorized in this subparagraph,
830 the department also shall issue a certificate of need for new
831 nursing facility beds in Amite County and a certificate of need
832 for new nursing facility beds in Carroll County.

833 (iii) Subject to the provisions of subparagraph
834 (v), the certificate of need issued under subparagraph (ii) for



835 nursing facility beds in each Long-Term Care Planning District
836 during each fiscal year shall first be available for nursing
837 facility beds in the county in the district having the highest
838 need for those beds, as shown in the fiscal year 1999 State Health
839 Plan. If there are no applications for a certificate of need for
840 nursing facility beds in the county having the highest need for
841 those beds by the date specified by the department, then the
842 certificate of need shall be available for nursing facility beds
843 in other counties in the district in descending order of the need
844 for those beds, from the county with the second highest need to
845 the county with the lowest need, until an application is received
846 for nursing facility beds in an eligible county in the district.

847 (iv) Subject to the provisions of subparagraph
848 (v), the certificate of need issued under subparagraph (ii) for
849 nursing facility beds in the two (2) counties from the state at
850 large during each fiscal year shall first be available for nursing
851 facility beds in the two (2) counties that have the highest need
852 in the state for those beds, as shown in the fiscal year 1999
853 State Health Plan, when considering the need on a statewide basis
854 and without regard to the Long-Term Care Planning Districts in
855 which the counties are located. If there are no applications for
856 a certificate of need for nursing facility beds in either of the
857 two (2) counties having the highest need for those beds on a
858 statewide basis by the date specified by the department, then the
859 certificate of need shall be available for nursing facility beds



860 in other counties from the state at large in descending order of
861 the need for those beds on a statewide basis, from the county with
862 the second highest need to the county with the lowest need, until
863 an application is received for nursing facility beds in an
864 eligible county from the state at large.

865 (v) If a certificate of need is authorized to be
866 issued under this paragraph (q) for nursing facility beds in a
867 county on the basis of the need in the Long-Term Care Planning
868 District during any fiscal year of the four-year period, a
869 certificate of need shall not also be available under this
870 paragraph (q) for additional nursing facility beds in that county
871 on the basis of the need in the state at large, and that county
872 shall be excluded in determining which counties have the highest
873 need for nursing facility beds in the state at large for that
874 fiscal year. After a certificate of need has been issued under
875 this paragraph (q) for nursing facility beds in a county during
876 any fiscal year of the four-year period, a certificate of need
877 shall not be available again under this paragraph (q) for
878 additional nursing facility beds in that county during the
879 four-year period, and that county shall be excluded in determining
880 which counties have the highest need for nursing facility beds in
881 succeeding fiscal years.

882 (vi) If more than one (1) application is made for
883 a certificate of need for nursing home facility beds available
884 under this paragraph (q), in Yalobusha, Newton or Tallahatchie



885 County, and one (1) of the applicants is a county-owned hospital
886 located in the county where the nursing facility beds are
887 available, the department shall give priority to the county-owned
888 hospital in granting the certificate of need if the following
889 conditions are met:

890 1. The county-owned hospital fully meets all
891 applicable criteria and standards required to obtain a certificate
892 of need for the nursing facility beds; and

893 2. The county-owned hospital's qualifications
894 for the certificate of need, as shown in its application and as
895 determined by the department, are at least equal to the
896 qualifications of the other applicants for the certificate of
897 need.

898 (r) (i) Beginning on July 1, 1999, the State
899 Department of Health shall issue certificates of need during each
900 of the next two (2) fiscal years for the construction or expansion
901 of nursing facility beds or the conversion of other beds to
902 nursing facility beds in each of the four (4) Long-Term Care
903 Planning Districts designated in the fiscal year 1999 State Health
904 Plan, to provide care exclusively to patients with Alzheimer's
905 disease.

906 (ii) Not more than twenty (20) beds may be
907 authorized by any certificate of need issued under this paragraph
908 (r), and not more than a total of sixty (60) beds may be
909 authorized in any Long-Term Care Planning District by all



910 certificates of need issued under this paragraph (r). However,
911 the total number of beds that may be authorized by all
912 certificates of need issued under this paragraph (r) during any
913 fiscal year shall not exceed one hundred twenty (120) beds, and
914 the total number of beds that may be authorized in any Long-Term
915 Care Planning District during any fiscal year shall not exceed
916 forty (40) beds. Of the certificates of need that are issued for
917 each Long-Term Care Planning District during the next two (2)
918 fiscal years, at least one (1) shall be issued for beds in the
919 northern part of the district, at least one (1) shall be issued
920 for beds in the central part of the district, and at least one (1)
921 shall be issued for beds in the southern part of the district.

922 (iii) The State Department of Health, in
923 consultation with the Department of Mental Health and the Division
924 of Medicaid, shall develop and prescribe the staffing levels,
925 space requirements and other standards and requirements that must
926 be met with regard to the nursing facility beds authorized under
927 this paragraph (r) to provide care exclusively to patients with
928 Alzheimer's disease.

929 (s) The State Department of Health may issue a
930 certificate of need to a nonprofit skilled nursing facility using
931 the Green House model of skilled nursing care and located in Yazoo
932 City, Yazoo County, Mississippi, for the construction, expansion
933 or conversion of not more than nineteen (19) nursing facility
934 beds. For purposes of this paragraph (s), the provisions of



935 Section 41-7-193(1) requiring substantial compliance with the
936 projection of need as reported in the current State Health Plan
937 and the provisions of Section 41-7-197 requiring a formal
938 certificate of need hearing process are waived. There shall be no
939 prohibition or restrictions on participation in the Medicaid
940 program for the person receiving the certificate of need
941 authorized under this paragraph (s).

942 (t) The State Department of Health shall issue
943 certificates of need to the owner of a nursing facility in
944 operation at the time of Hurricane Katrina in Hancock County that
945 was not operational on December 31, 2005, because of damage
946 sustained from Hurricane Katrina to authorize the following: (i)
947 the construction of a new nursing facility in Harrison County;
948 (ii) the relocation of forty-nine (49) nursing facility beds from
949 the Hancock County facility to the new Harrison County facility;
950 (iii) the establishment of not more than twenty (20) non-Medicaid
951 nursing facility beds at the Hancock County facility; and (iv) the
952 establishment of not more than twenty (20) non-Medicaid beds at
953 the new Harrison County facility. The certificates of need that
954 authorize the non-Medicaid nursing facility beds under
955 subparagraphs (iii) and (iv) of this paragraph (t) shall be
956 subject to the following conditions: The owner of the Hancock
957 County facility and the new Harrison County facility must agree in
958 writing that no more than fifty (50) of the beds at the Hancock
959 County facility and no more than forty-nine (49) of the beds at



960 the Harrison County facility will be certified for participation
961 in the Medicaid program, and that no claim will be submitted for
962 Medicaid reimbursement for more than fifty (50) patients in the
963 Hancock County facility in any month, or for more than forty-nine
964 (49) patients in the Harrison County facility in any month, or for
965 any patient in either facility who is in a bed that is not
966 Medicaid-certified. This written agreement by the owner of the
967 nursing facilities shall be a condition of the issuance of the
968 certificates of need under this paragraph (t), and the agreement
969 shall be fully binding on any later owner or owners of either
970 facility if the ownership of either facility is transferred at any
971 time after the certificates of need are issued. After this
972 written agreement is executed, the Division of Medicaid and the
973 State Department of Health shall not certify more than fifty (50)
974 of the beds at the Hancock County facility or more than forty-nine
975 (49) of the beds at the Harrison County facility for participation
976 in the Medicaid program. If the Hancock County facility violates
977 the terms of the written agreement by admitting or keeping in the
978 facility on a regular or continuing basis more than fifty (50)
979 patients who are participating in the Medicaid program, or if the
980 Harrison County facility violates the terms of the written
981 agreement by admitting or keeping in the facility on a regular or
982 continuing basis more than forty-nine (49) patients who are
983 participating in the Medicaid program, the State Department of
984 Health shall revoke the license of the facility that is in



985 violation of the agreement, at the time that the department
986 determines, after a hearing complying with due process, that the
987 facility has violated the agreement.

988 (u) The State Department of Health shall issue a
989 certificate of need to a nonprofit venture for the establishment,
990 construction and operation of a skilled nursing facility of not
991 more than sixty (60) beds to provide skilled nursing care for
992 ventilator dependent or otherwise medically dependent pediatric
993 patients who require medical and nursing care or rehabilitation
994 services to be located in a county in which an academic medical
995 center and a children's hospital are located, and for any
996 construction and for the acquisition of equipment related to those
997 beds. The facility shall be authorized to keep such ventilator
998 dependent or otherwise medically dependent pediatric patients
999 beyond age twenty-one (21) in accordance with regulations of the
1000 State Board of Health. For purposes of this paragraph (u), the
1001 provisions of Section 41-7-193(1) requiring substantial compliance
1002 with the projection of need as reported in the current State
1003 Health Plan are waived, and the provisions of Section 41-7-197
1004 requiring a formal certificate of need hearing process are waived.
1005 The beds authorized by this paragraph shall be counted as
1006 pediatric skilled nursing facility beds for health planning
1007 purposes under Section 41-7-171 et seq. There shall be no
1008 prohibition of or restrictions on participation in the Medicaid



1009 program for the person receiving the certificate of need
1010 authorized by this paragraph.

1011 (3) The State Department of Health may grant approval for
1012 and issue certificates of need to any person proposing the new
1013 construction of, addition to, conversion of beds of or expansion
1014 of any health care facility defined in subparagraph (x)
1015 (psychiatric residential treatment facility) of Section
1016 41-7-173(* * *e). The total number of beds which may be
1017 authorized by such certificates of need shall not exceed three
1018 hundred thirty-four (334) beds for the entire state.

1019 (a) Of the total number of beds authorized under this
1020 subsection, the department shall issue a certificate of need to a
1021 privately owned psychiatric residential treatment facility in
1022 Simpson County for the conversion of sixteen (16) intermediate
1023 care facility for the * * * intellectually disabled (ICF-ID) beds
1024 to psychiatric residential treatment facility beds, provided that
1025 facility agrees in writing that the facility shall give priority
1026 for the use of those sixteen (16) beds to Mississippi residents
1027 who are presently being treated in out-of-state facilities.

1028 (b) Of the total number of beds authorized under this
1029 subsection, the department may issue a certificate or certificates
1030 of need for the construction or expansion of psychiatric
1031 residential treatment facility beds or the conversion of other
1032 beds to psychiatric residential treatment facility beds in Warren
1033 County, not to exceed sixty (60) psychiatric residential treatment



1034 facility beds, provided that the facility agrees in writing that
1035 no more than thirty (30) of the beds at the psychiatric
1036 residential treatment facility will be certified for participation
1037 in the Medicaid program (Section 43-13-101 et seq.) for the use of
1038 any patients other than those who are participating only in the
1039 Medicaid program of another state, and that no claim will be
1040 submitted to the Division of Medicaid for Medicaid reimbursement
1041 for more than thirty (30) patients in the psychiatric residential
1042 treatment facility in any day or for any patient in the
1043 psychiatric residential treatment facility who is in a bed that is
1044 not Medicaid-certified. This written agreement by the recipient
1045 of the certificate of need shall be a condition of the issuance of
1046 the certificate of need under this paragraph, and the agreement
1047 shall be fully binding on any subsequent owner of the psychiatric
1048 residential treatment facility if the ownership of the facility is
1049 transferred at any time after the issuance of the certificate of
1050 need. After this written agreement is executed, the Division of
1051 Medicaid and the State Department of Health shall not certify more
1052 than thirty (30) of the beds in the psychiatric residential
1053 treatment facility for participation in the Medicaid program for
1054 the use of any patients other than those who are participating
1055 only in the Medicaid program of another state. If the psychiatric
1056 residential treatment facility violates the terms of the written
1057 agreement by admitting or keeping in the facility on a regular or
1058 continuing basis more than thirty (30) patients who are



1059 participating in the Mississippi Medicaid program, the State
1060 Department of Health shall revoke the license of the facility, at
1061 the time that the department determines, after a hearing complying
1062 with due process, that the facility has violated the condition
1063 upon which the certificate of need was issued, as provided in this
1064 paragraph and in the written agreement.

1065 The State Department of Health, on or before July 1, 2002,
1066 shall transfer the certificate of need authorized under the
1067 authority of this paragraph (b), or reissue the certificate of
1068 need if it has expired, to River Region Health System.

1069 (c) Of the total number of beds authorized under this
1070 subsection, the department shall issue a certificate of need to a
1071 hospital currently operating Medicaid-certified acute psychiatric
1072 beds for adolescents in DeSoto County, for the establishment of a
1073 forty-bed psychiatric residential treatment facility in DeSoto
1074 County, provided that the hospital agrees in writing (i) that the
1075 hospital shall give priority for the use of those forty (40) beds
1076 to Mississippi residents who are presently being treated in
1077 out-of-state facilities, and (ii) that no more than fifteen (15)
1078 of the beds at the psychiatric residential treatment facility will
1079 be certified for participation in the Medicaid program (Section
1080 43-13-101 et seq.), and that no claim will be submitted for
1081 Medicaid reimbursement for more than fifteen (15) patients in the
1082 psychiatric residential treatment facility in any day or for any
1083 patient in the psychiatric residential treatment facility who is



1084 in a bed that is not Medicaid-certified. This written agreement
1085 by the recipient of the certificate of need shall be a condition
1086 of the issuance of the certificate of need under this paragraph,
1087 and the agreement shall be fully binding on any subsequent owner
1088 of the psychiatric residential treatment facility if the ownership
1089 of the facility is transferred at any time after the issuance of
1090 the certificate of need. After this written agreement is
1091 executed, the Division of Medicaid and the State Department of
1092 Health shall not certify more than fifteen (15) of the beds in the
1093 psychiatric residential treatment facility for participation in
1094 the Medicaid program. If the psychiatric residential treatment
1095 facility violates the terms of the written agreement by admitting
1096 or keeping in the facility on a regular or continuing basis more
1097 than fifteen (15) patients who are participating in the Medicaid
1098 program, the State Department of Health shall revoke the license
1099 of the facility, at the time that the department determines, after
1100 a hearing complying with due process, that the facility has
1101 violated the condition upon which the certificate of need was
1102 issued, as provided in this paragraph and in the written
1103 agreement.

1104 (d) Of the total number of beds authorized under this
1105 subsection, the department may issue a certificate or certificates
1106 of need for the construction or expansion of psychiatric
1107 residential treatment facility beds or the conversion of other
1108 beds to psychiatric treatment facility beds, not to exceed thirty



1109 (30) psychiatric residential treatment facility beds, in either
1110 Alcorn, Tishomingo, Prentiss, Lee, Itawamba, Monroe, Chickasaw,
1111 Pontotoc, Calhoun, Lafayette, Union, Benton or Tippah County.

1112 (e) Of the total number of beds authorized under this
1113 subsection (3) the department shall issue a certificate of need to
1114 a privately owned, nonprofit psychiatric residential treatment
1115 facility in Hinds County for an eight-bed expansion of the
1116 facility, provided that the facility agrees in writing that the
1117 facility shall give priority for the use of those eight (8) beds
1118 to Mississippi residents who are presently being treated in
1119 out-of-state facilities.

1120 (f) The department shall issue a certificate of need to
1121 a one-hundred-thirty-four-bed specialty hospital located on
1122 twenty-nine and forty-four one-hundredths (29.44) commercial acres
1123 at 5900 Highway 39 North in Meridian (Lauderdale County),
1124 Mississippi, for the addition, construction or expansion of
1125 child/adolescent psychiatric residential treatment facility beds
1126 in Lauderdale County. As a condition of issuance of the
1127 certificate of need under this paragraph, the facility shall give
1128 priority in admissions to the child/adolescent psychiatric
1129 residential treatment facility beds authorized under this
1130 paragraph to patients who otherwise would require out-of-state
1131 placement. The Division of Medicaid, in conjunction with the
1132 Department of Human Services, shall furnish the facility a list of
1133 all out-of-state patients on a quarterly basis. Furthermore,



1134 notice shall also be provided to the parent, custodial parent or
1135 guardian of each out-of-state patient notifying them of the
1136 priority status granted by this paragraph. For purposes of this
1137 paragraph, the provisions of Section 41-7-193(1) requiring
1138 substantial compliance with the projection of need as reported in
1139 the current State Health Plan are waived. The total number of
1140 child/adolescent psychiatric residential treatment facility beds
1141 that may be authorized under the authority of this paragraph shall
1142 be sixty (60) beds. There shall be no prohibition or restrictions
1143 on participation in the Medicaid program (Section 43-13-101 et
1144 seq.) for the person receiving the certificate of need authorized
1145 under this paragraph or for the beds converted pursuant to the
1146 authority of that certificate of need.

1147 (4) (a) From and after March 25, 2021, the department may
1148 issue a certificate of need to any person for the new construction
1149 of any hospital, psychiatric hospital or chemical dependency
1150 hospital that will contain any child/adolescent psychiatric or
1151 child/adolescent chemical dependency beds, or for the conversion
1152 of any other health care facility to a hospital, psychiatric
1153 hospital or chemical dependency hospital that will contain any
1154 child/adolescent psychiatric or child/adolescent chemical
1155 dependency beds. There shall be no prohibition or restrictions on
1156 participation in the Medicaid program (Section 43-13-101 et seq.)
1157 for the person(s) receiving the certificate(s) of need authorized
1158 under this paragraph (a) or for the beds converted pursuant to the



1159 authority of that certificate of need. In issuing any new
1160 certificate of need for any child/adolescent psychiatric or
1161 child/adolescent chemical dependency beds, either by new
1162 construction or conversion of beds of another category, the
1163 department shall give preference to beds which will be located in
1164 an area of the state which does not have such beds located in it,
1165 and to a location more than sixty-five (65) miles from existing
1166 beds. Upon receiving 2020 census data, the department may amend
1167 the State Health Plan regarding child/adolescent psychiatric and
1168 child/adolescent chemical dependency beds to reflect the need
1169 based on new census data.

1170 (i) [Deleted]

1171 (ii) The department may issue a certificate of
1172 need for the conversion of existing beds in a county hospital in
1173 Choctaw County from acute care beds to child/adolescent chemical
1174 dependency beds. For purposes of this subparagraph (ii), the
1175 provisions of Section 41-7-193(1) requiring substantial compliance
1176 with the projection of need as reported in the current State
1177 Health Plan are waived. The total number of beds that may be
1178 authorized under authority of this subparagraph shall not exceed
1179 twenty (20) beds. There shall be no prohibition or restrictions
1180 on participation in the Medicaid program (Section 43-13-101 et
1181 seq.) for the hospital receiving the certificate of need
1182 authorized under this subparagraph or for the beds converted
1183 pursuant to the authority of that certificate of need.



1184 (iii) The department may issue a certificate or
1185 certificates of need for the construction or expansion of
1186 child/adolescent psychiatric beds or the conversion of other beds
1187 to child/adolescent psychiatric beds in Warren County. For
1188 purposes of this subparagraph (iii), the provisions of Section
1189 41-7-193(1) requiring substantial compliance with the projection
1190 of need as reported in the current State Health Plan are waived.
1191 The total number of beds that may be authorized under the
1192 authority of this subparagraph shall not exceed twenty (20) beds.
1193 There shall be no prohibition or restrictions on participation in
1194 the Medicaid program (Section 43-13-101 et seq.) for the person
1195 receiving the certificate of need authorized under this
1196 subparagraph or for the beds converted pursuant to the authority
1197 of that certificate of need.

1198 If by January 1, 2002, there has been no significant
1199 commencement of construction of the beds authorized under this
1200 subparagraph (iii), or no significant action taken to convert
1201 existing beds to the beds authorized under this subparagraph, then
1202 the certificate of need that was previously issued under this
1203 subparagraph shall expire. If the previously issued certificate
1204 of need expires, the department may accept applications for
1205 issuance of another certificate of need for the beds authorized
1206 under this subparagraph, and may issue a certificate of need to
1207 authorize the construction, expansion or conversion of the beds
1208 authorized under this subparagraph.



1209 (iv) The department shall issue a certificate of
1210 need to the Region 7 Mental Health/Retardation Commission for the
1211 construction or expansion of child/adolescent psychiatric beds or
1212 the conversion of other beds to child/adolescent psychiatric beds
1213 in any of the counties served by the commission. For purposes of
1214 this subparagraph (iv), the provisions of Section 41-7-193(1)
1215 requiring substantial compliance with the projection of need as
1216 reported in the current State Health Plan are waived. The total
1217 number of beds that may be authorized under the authority of this
1218 subparagraph shall not exceed twenty (20) beds. There shall be no
1219 prohibition or restrictions on participation in the Medicaid
1220 program (Section 43-13-101 et seq.) for the person receiving the
1221 certificate of need authorized under this subparagraph or for the
1222 beds converted pursuant to the authority of that certificate of
1223 need.

1224 (v) The department may issue a certificate of need
1225 to any county hospital located in Leflore County for the
1226 construction or expansion of adult psychiatric beds or the
1227 conversion of other beds to adult psychiatric beds, not to exceed
1228 twenty (20) beds, provided that the recipient of the certificate
1229 of need agrees in writing that the adult psychiatric beds will not
1230 at any time be certified for participation in the Medicaid program
1231 and that the hospital will not admit or keep any patients who are
1232 participating in the Medicaid program in any of such adult
1233 psychiatric beds. This written agreement by the recipient of the



1234 certificate of need shall be fully binding on any subsequent owner
1235 of the hospital if the ownership of the hospital is transferred at
1236 any time after the issuance of the certificate of need. Agreement
1237 that the adult psychiatric beds will not be certified for
1238 participation in the Medicaid program shall be a condition of the
1239 issuance of a certificate of need to any person under this
1240 subparagraph (v), and if such hospital at any time after the
1241 issuance of the certificate of need, regardless of the ownership
1242 of the hospital, has any of such adult psychiatric beds certified
1243 for participation in the Medicaid program or admits or keeps any
1244 Medicaid patients in such adult psychiatric beds, the State
1245 Department of Health shall revoke the certificate of need, if it
1246 is still outstanding, and shall deny or revoke the license of the
1247 hospital at the time that the department determines, after a
1248 hearing complying with due process, that the hospital has failed
1249 to comply with any of the conditions upon which the certificate of
1250 need was issued, as provided in this subparagraph and in the
1251 written agreement by the recipient of the certificate of need.

1252 (vi) The department may issue a certificate or
1253 certificates of need for the expansion of child psychiatric beds
1254 or the conversion of other beds to child psychiatric beds at the
1255 University of Mississippi Medical Center. For purposes of this
1256 subparagraph (vi), the provisions of Section 41-7-193(1) requiring
1257 substantial compliance with the projection of need as reported in
1258 the current State Health Plan are waived. The total number of



1259 beds that may be authorized under the authority of this
1260 subparagraph shall not exceed fifteen (15) beds. There shall be
1261 no prohibition or restrictions on participation in the Medicaid
1262 program (Section 43-13-101 et seq.) for the hospital receiving the
1263 certificate of need authorized under this subparagraph or for the
1264 beds converted pursuant to the authority of that certificate of
1265 need.

1266 (b) From and after July 1, 1990, no hospital,
1267 psychiatric hospital or chemical dependency hospital shall be
1268 authorized to add any child/adolescent psychiatric or
1269 child/adolescent chemical dependency beds or convert any beds of
1270 another category to child/adolescent psychiatric or
1271 child/adolescent chemical dependency beds without a certificate of
1272 need under the authority of subsection (1)(c) and subsection
1273 (4)(a) of this section.

1274 (5) The department may issue a certificate of need to a
1275 county hospital in Winston County for the conversion of fifteen
1276 (15) acute care beds to geriatric psychiatric care beds.

1277 (6) The State Department of Health shall issue a certificate
1278 of need to a Mississippi corporation qualified to manage a
1279 long-term care hospital as defined in Section
1280 41-7-173(* * *e) (xii) in Harrison County, not to exceed eighty
1281 (80) beds, including any necessary renovation or construction
1282 required for licensure and certification, provided that the
1283 recipient of the certificate of need agrees in writing that the



1284 long-term care hospital will not at any time participate in the
1285 Medicaid program (Section 43-13-101 et seq.) or admit or keep any
1286 patients in the long-term care hospital who are participating in
1287 the Medicaid program. This written agreement by the recipient of
1288 the certificate of need shall be fully binding on any subsequent
1289 owner of the long-term care hospital, if the ownership of the
1290 facility is transferred at any time after the issuance of the
1291 certificate of need. Agreement that the long-term care hospital
1292 will not participate in the Medicaid program shall be a condition
1293 of the issuance of a certificate of need to any person under this
1294 subsection (6), and if such long-term care hospital at any time
1295 after the issuance of the certificate of need, regardless of the
1296 ownership of the facility, participates in the Medicaid program or
1297 admits or keeps any patients in the facility who are participating
1298 in the Medicaid program, the State Department of Health shall
1299 revoke the certificate of need, if it is still outstanding, and
1300 shall deny or revoke the license of the long-term care hospital,
1301 at the time that the department determines, after a hearing
1302 complying with due process, that the facility has failed to comply
1303 with any of the conditions upon which the certificate of need was
1304 issued, as provided in this subsection and in the written
1305 agreement by the recipient of the certificate of need. For
1306 purposes of this subsection, the provisions of Section 41-7-193(1)
1307 requiring substantial compliance with the projection of need as
1308 reported in the current State Health Plan are waived.



1309 (7) The State Department of Health may issue a certificate
1310 of need to any hospital in the state to utilize a portion of its
1311 beds for the "swing-bed" concept. Any such hospital must be in
1312 conformance with the federal regulations regarding such swing-bed
1313 concept at the time it submits its application for a certificate
1314 of need to the State Department of Health, except that such
1315 hospital may have more licensed beds or a higher average daily
1316 census (ADC) than the maximum number specified in federal
1317 regulations for participation in the swing-bed program. Any
1318 hospital meeting all federal requirements for participation in the
1319 swing-bed program which receives such certificate of need shall
1320 render services provided under the swing-bed concept to any
1321 patient eligible for Medicare (Title XVIII of the Social Security
1322 Act) who is certified by a physician to be in need of such
1323 services, and no such hospital shall permit any patient who is
1324 eligible for both Medicaid and Medicare or eligible only for
1325 Medicaid to stay in the swing beds of the hospital for more than
1326 thirty (30) days per admission unless the hospital receives prior
1327 approval for such patient from the Division of Medicaid, Office of
1328 the Governor. Any hospital having more licensed beds or a higher
1329 average daily census (ADC) than the maximum number specified in
1330 federal regulations for participation in the swing-bed program
1331 which receives such certificate of need shall develop a procedure
1332 to ensure that before a patient is allowed to stay in the swing
1333 beds of the hospital, there are no vacant nursing home beds



1334 available for that patient located within a fifty-mile radius of
1335 the hospital. When any such hospital has a patient staying in the
1336 swing beds of the hospital and the hospital receives notice from a
1337 nursing home located within such radius that there is a vacant bed
1338 available for that patient, the hospital shall transfer the
1339 patient to the nursing home within a reasonable time after receipt
1340 of the notice. Any hospital which is subject to the requirements
1341 of the two (2) preceding sentences of this subsection may be
1342 suspended from participation in the swing-bed program for a
1343 reasonable period of time by the State Department of Health if the
1344 department, after a hearing complying with due process, determines
1345 that the hospital has failed to comply with any of those
1346 requirements.

1347 (8) The Department of Health shall not grant approval for or
1348 issue a certificate of need to any person proposing the new
1349 construction of, addition to or expansion of a health care
1350 facility as defined in subparagraph (viii) of Section
1351 41-7-173(* * *e), except as hereinafter provided: The department
1352 may issue a certificate of need to a nonprofit corporation located
1353 in Madison County, Mississippi, for the construction, expansion or
1354 conversion of not more than twenty (20) beds in a community living
1355 program for developmentally disabled adults in a facility as
1356 defined in subparagraph (viii) of Section 41-7-173(* * *e). For
1357 purposes of this subsection (8), the provisions of Section
1358 41-7-193(1) requiring substantial compliance with the projection



1359 of need as reported in the current State Health Plan and the
1360 provisions of Section 41-7-197 requiring a formal certificate of
1361 need hearing process are waived. There shall be no prohibition or
1362 restrictions on participation in the Medicaid program for the
1363 person receiving the certificate of need authorized under this
1364 subsection (8).

1365 (9) The Department of Health shall not grant approval for or
1366 issue a certificate of need to any person proposing the
1367 establishment of, or expansion of the currently approved territory
1368 of, or the contracting to establish a home office, subunit or
1369 branch office within the space operated as a health care facility
1370 as defined in Section 41-7-173(* * *e) (i) through (viii) by a
1371 health care facility as defined in subparagraph (ix) of Section
1372 41-7-173(* * *e).

1373 (10) Health care facilities owned and/or operated by the
1374 state or its agencies are exempt from the restraints in this
1375 section against issuance of a certificate of need if such addition
1376 or expansion consists of repairing or renovation necessary to
1377 comply with the state licensure law. This exception shall not
1378 apply to the new construction of any building by such state
1379 facility. This exception shall not apply to any health care
1380 facilities owned and/or operated by counties, municipalities,
1381 districts, unincorporated areas, other defined persons, or any
1382 combination thereof.



1383 (11) The new construction, renovation or expansion of or
1384 addition to any health care facility defined in subparagraph (ii)
1385 (psychiatric hospital), subparagraph (iv) (skilled nursing
1386 facility), subparagraph (vi) (intermediate care facility),
1387 subparagraph (viii) (intermediate care facility for the * * *
1388 intellectually disabled) and subparagraph (x) (psychiatric
1389 residential treatment facility) of Section 41-7-173(* * *e) which
1390 is owned by the State of Mississippi and under the direction and
1391 control of the State Department of Mental Health, and the addition
1392 of new beds or the conversion of beds from one category to another
1393 in any such defined health care facility which is owned by the
1394 State of Mississippi and under the direction and control of the
1395 State Department of Mental Health, shall not require the issuance
1396 of a certificate of need under Section 41-7-171 et seq.,
1397 notwithstanding any provision in Section 41-7-171 et seq. to the
1398 contrary.

1399 (12) The new construction, renovation or expansion of or
1400 addition to any veterans homes or domiciliaries for eligible
1401 veterans of the State of Mississippi as authorized under Section
1402 35-1-19 shall not require the issuance of a certificate of need,
1403 notwithstanding any provision in Section 41-7-171 et seq. to the
1404 contrary.

1405 (13) The repair or the rebuilding of an existing, operating
1406 health care facility that sustained significant damage from a
1407 natural disaster that occurred after April 15, 2014, in an area



1408 that is proclaimed a disaster area or subject to a state of
1409 emergency by the Governor or by the President of the United States
1410 shall be exempt from all of the requirements of the Mississippi
1411 Certificate of Need Law (Section 41-7-171 et seq.) and any and all
1412 rules and regulations promulgated under that law, subject to the
1413 following conditions:

1414 (a) The repair or the rebuilding of any such damaged
1415 health care facility must be within one (1) mile of the
1416 pre-disaster location of the campus of the damaged health care
1417 facility, except that any temporary post-disaster health care
1418 facility operating location may be within five (5) miles of the
1419 pre-disaster location of the damaged health care facility;

1420 (b) The repair or the rebuilding of the damaged health
1421 care facility (i) does not increase or change the complement of
1422 its bed capacity that it had before the Governor's or the
1423 President's proclamation, * * *and (* * * ii) does not rebuild in
1424 a different county; however, this paragraph does not restrict or
1425 prevent a health care facility from decreasing its bed capacity
1426 that it had before the Governor's or the President's proclamation,
1427 or from decreasing the levels of or decreasing or eliminating the
1428 types of health care services that it provided before the
1429 Governor's or the President's proclamation, when the damaged
1430 health care facility is repaired or rebuilt;

1431 (c) The exemption from Certificate of Need Law provided
1432 under this subsection (13) is valid for only five (5) years from



1433 the date of the Governor's or the President's proclamation. If
1434 actual construction has not begun within that five-year period,
1435 the exemption provided under this subsection is inapplicable; and

1436 (d) The Division of Health Facilities Licensure and
1437 Certification of the State Department of Health shall provide the
1438 same oversight for the repair or the rebuilding of the damaged
1439 health care facility that it provides to all health care facility
1440 construction projects in the state.

1441 For the purposes of this subsection (13), "significant
1442 damage" to a health care facility means damage to the health care
1443 facility requiring an expenditure of at least One Million Dollars
1444 (\$1,000,000.00).

1445 (14) The State Department of Health shall issue a
1446 certificate of need to any hospital which is currently licensed
1447 for two hundred fifty (250) or more acute care beds and is located
1448 in any general hospital service area not having a comprehensive
1449 cancer center, for the establishment and equipping of such a
1450 center which provides facilities and services for outpatient
1451 radiation oncology therapy, outpatient medical oncology therapy,
1452 and appropriate support services including the provision of
1453 radiation therapy services. The provisions of Section 41-7-193(1)
1454 regarding substantial compliance with the projection of need as
1455 reported in the current State Health Plan are waived for the
1456 purpose of this subsection.



1457 (15) The State Department of Health may authorize the
1458 transfer of hospital beds, not to exceed sixty (60) beds, from the
1459 North Panola Community Hospital to the South Panola Community
1460 Hospital. The authorization for the transfer of those beds shall
1461 be exempt from the certificate of need review process.

1462 (16) The State Department of Health shall issue any
1463 certificates of need necessary for Mississippi State University
1464 and a public or private health care provider to jointly acquire
1465 and operate a linear accelerator and a magnetic resonance imaging
1466 unit. Those certificates of need shall cover all capital
1467 expenditures related to the project between Mississippi State
1468 University and the health care provider, including, but not
1469 limited to, the acquisition of the linear accelerator, the
1470 magnetic resonance imaging unit and other radiological modalities;
1471 the offering of linear accelerator and magnetic resonance imaging
1472 services; and the cost of construction of facilities in which to
1473 locate these services. The linear accelerator and the magnetic
1474 resonance imaging unit shall be (a) located in the City of
1475 Starkville, Oktibbeha County, Mississippi; (b) operated jointly by
1476 Mississippi State University and the public or private health care
1477 provider selected by Mississippi State University through a
1478 request for proposals (RFP) process in which Mississippi State
1479 University selects, and the Board of Trustees of State
1480 Institutions of Higher Learning approves, the health care provider
1481 that makes the best overall proposal; (c) available to Mississippi



1482 State University for research purposes two-thirds (2/3) of the
1483 time that the linear accelerator and magnetic resonance imaging
1484 unit are operational; and (d) available to the public or private
1485 health care provider selected by Mississippi State University and
1486 approved by the Board of Trustees of State Institutions of Higher
1487 Learning one-third (1/3) of the time for clinical, diagnostic and
1488 treatment purposes. For purposes of this subsection, the
1489 provisions of Section 41-7-193(1) requiring substantial compliance
1490 with the projection of need as reported in the current State
1491 Health Plan are waived.

1492 (17) The State Department of Health shall issue a
1493 certificate of need for the construction of an acute care hospital
1494 in Kemper County, not to exceed twenty-five (25) beds, which shall
1495 be named the "John C. Stennis Memorial Hospital." In issuing the
1496 certificate of need under this subsection, the department shall
1497 give priority to a hospital located in Lauderdale County that has
1498 two hundred fifteen (215) beds. For purposes of this subsection,
1499 the provisions of Section 41-7-193(1) requiring substantial
1500 compliance with the projection of need as reported in the current
1501 State Health Plan and the provisions of Section 41-7-197 requiring
1502 a formal certificate of need hearing process are waived. There
1503 shall be no prohibition or restrictions on participation in the
1504 Medicaid program (Section 43-13-101 et seq.) for the person or
1505 entity receiving the certificate of need authorized under this



1506 subsection or for the beds constructed under the authority of that
1507 certificate of need.

1508 (18) The planning, design, construction, renovation,
1509 addition, furnishing and equipping of a clinical research unit at
1510 any health care facility defined in Section 41-7-173(* * *e) that
1511 is under the direction and control of the University of
1512 Mississippi Medical Center and located in Jackson, Mississippi,
1513 and the addition of new beds or the conversion of beds from one
1514 (1) category to another in any such clinical research unit, shall
1515 not require the issuance of a certificate of need under Section
1516 41-7-171 et seq., notwithstanding any provision in Section
1517 41-7-171 et seq. to the contrary.

1518 (19) [Repealed]

1519 (20) Nothing in this section or in any other provision of
1520 Section 41-7-171 et seq. shall prevent any nursing facility from
1521 designating an appropriate number of existing beds in the facility
1522 as beds for providing care exclusively to patients with
1523 Alzheimer's disease.

1524 (21) Nothing in this section or any other provision of
1525 Section 41-7-171 et seq. shall prevent any health care facility
1526 from the new construction, renovation, conversion or expansion of
1527 new beds in the facility designated as intensive care units,
1528 negative pressure rooms, or isolation rooms pursuant to the
1529 provisions of Sections 41-14-1 through 41-14-11. For purposes of
1530 this subsection, the provisions of Section 41-7-193(1) requiring



1531 substantial compliance with the projection of need as reported in
1532 the current State Health Plan and the provisions of Section
1533 41-7-197 requiring a formal certificate of need hearing process
1534 are waived.

1535 **SECTION 8.** Section 41-7-193, Mississippi Code of 1972, is
1536 amended as follows:

1537 41-7-193. (1) No person may enter into any financing
1538 arrangement or commitment for financing a * * * project requiring
1539 a certificate of need unless such certificate has been granted for
1540 such purpose. A certificate of need shall not be granted or
1541 issued to any person for any proposal, cause or reason, unless the
1542 proposal has been reviewed for consistency with the specifications
1543 and the criteria established by the State Department of Health and
1544 substantially complies with the projection of need as reported in
1545 the state health plan in effect at the time the application for
1546 the proposal was submitted.

1547 (2) An application for a certificate of need for * * * a
1548 proposal requiring a certificate of need shall specify the time,
1549 within that granted, such shall be functional or operational
1550 according to a time schedule submitted with the application. Each
1551 certificate of need shall specify the maximum amount of capital
1552 expenditure that may be obligated. The State Department of Health
1553 shall periodically review the progress and time schedule of any
1554 person issued or granted a certificate of need for any purpose.



1555 (3) An application for a certificate of need may be filed at
1556 any time with the department after the applicant has given the
1557 department fifteen (15) days' written notice of its intent to
1558 apply for a certificate of need. The department shall not delay
1559 review of an application. The department shall make its
1560 recommendation approving or disapproving a complete application
1561 within forty-five (45) days of the date the application was filed
1562 or within fifteen (15) days of receipt of any requested
1563 information, whichever is later, * * * the request to be made by
1564 the department within fifteen (15) days of the filing of the
1565 application.

1566 **SECTION 9.** Section 41-7-197, Mississippi Code of 1972, is
1567 amended as follows:

1568 41-7-197. (1) The State Department of Health shall adopt
1569 and * * * use procedures for conducting certificate of need
1570 reviews. Such procedures shall include, inter alia, the
1571 following: (a) written notification to the applicant; (b) written
1572 notification to health care facilities in the same health service
1573 area as the proposed * * * health care facility; (c) written
1574 notification to other persons who * * * before the receipt of the
1575 application have filed a formal notice of intent to * * * operate
1576 a health care facility in the same service area; and (d)
1577 notification to members of the public who reside in the service
1578 area where the * * * facility is proposed, which may be provided
1579 through newspapers or public information channels.



1580 (2) All notices provided shall include, inter alia, the
1581 following: (a) the proposed schedule for the review; (b) written
1582 notification of the period within which a public hearing during
1583 the course of the review may be requested in writing by one or
1584 more affected persons, such request to be made within ten (10)
1585 days of the department's staff recommendation for approval or
1586 disapproval of an application; and (c) the manner in which
1587 notification will be provided of the time and place of any hearing
1588 so requested. Any such hearing shall be * * * begun by an
1589 independent hearing officer designated by the State Department of
1590 Health within sixty (60) days of the filing of the hearing request
1591 unless all parties to the hearing agree to extend the time for
1592 the * * * beginning of the hearing. At such hearing, the hearing
1593 officer and any person affected by the proposal being reviewed may
1594 conduct reasonable questioning of persons who make relevant
1595 factual allegations concerning the proposal. The hearing officer
1596 shall require that all persons be sworn before they may offer any
1597 testimony at the hearing, and the hearing officer is authorized to
1598 administer oaths. Any person so choosing may be represented by
1599 counsel at the hearing. A record of the hearing shall be made,
1600 which shall consist of a transcript of all testimony received, all
1601 documents and other material introduced by any interested person,
1602 the staff report and recommendation and such other material as the
1603 hearing officer considers relevant, including his own
1604 recommendation, which he shall make, after reviewing, studying and



1605 analyzing the evidence presented during the hearing, within a
1606 reasonable period of time after the hearing is closed, which in no
1607 event shall exceed forty-five (45) days. The completed record
1608 shall be certified to the State Health Officer, who shall consider
1609 only the record in making his decision, and shall not consider any
1610 evidence or material * * * that is not included * * * in the
1611 record. All final decisions regarding the issuance of a
1612 certificate of need shall be made by the State Health Officer.
1613 The State Health Officer shall make his or her written findings
1614 and issue his or her order after reviewing * * * the record. The
1615 findings and decision of the State Health Officer shall not be
1616 deferred to any later date.

1617 (3) Unless a hearing is held, if review by the State
1618 Department of Health concerning the issuance of a certificate of
1619 need is not complete with a final decision issued by the State
1620 Health Officer within the time specified by rule or regulation,
1621 which shall not exceed ninety (90) days from the filing of the
1622 application for a certificate of need, the proponent of the
1623 proposal may, within thirty (30) days after the expiration of the
1624 specified time for review, * * * begin such legal action as is
1625 necessary, in the Chancery Court of the First Judicial District of
1626 Hinds County or in the chancery court of the county in which
1627 the * * * facility is proposed to be * * * operated, to compel the
1628 State Health Officer to issue written findings and written order
1629 approving or disapproving the proposal in question.



1630 **SECTION 10.** Section 41-7-201, Mississippi Code of 1972, is
1631 amended as follows:

1632 41-7-201. (1) The provisions of this subsection (1) shall
1633 apply to any party appealing any final order of the State
1634 Department of Health pertaining to a certificate of need for a
1635 home health agency, as defined in Section 41-7-173(* * *e)(ix):

1636 (a) In addition to other remedies now available at law
1637 or in equity, any party aggrieved by any such final order of the
1638 State Department of Health shall have the right of appeal to the
1639 Chancery Court of the First Judicial District of Hinds County,
1640 Mississippi, which appeal must be filed within thirty (30) days
1641 after the date of the final order. * * * However, * * * any
1642 appeal of an order disapproving an application for such a
1643 certificate of need may be made to the chancery court of the
1644 county where the proposed construction, expansion or alteration
1645 was to be located * * *. Such appeal must be filed in accordance
1646 with the thirty (30) days for filing as * * * provided in this
1647 paragraph. Any appeal shall state briefly the nature of the
1648 proceedings before the State Department of Health and shall
1649 specify the order complained of. Any appeal shall state briefly
1650 the nature of the proceedings before the State Department of
1651 Health and shall specify the order complained of. Any person
1652 whose rights may be materially affected by the action of the State
1653 Department of Health may appear and become a party or the court



1654 may, upon motion, order that any such person, organization or
1655 entity be joined as a necessary party.

1656 (b) Upon the filing of such an appeal, the clerk of the
1657 chancery court shall serve notice thereof upon the State
1658 Department of Health, whereupon the State Department of Health
1659 shall, within thirty (30) days or within such additional time as
1660 the court may by order for cause allow from the service of such
1661 notice, certify to the chancery court the record in the case,
1662 which records shall include a transcript of all testimony,
1663 together with all exhibits or copies thereof, all pleadings,
1664 proceedings, orders, findings and opinions entered in the
1665 case; * * * however, * * * the parties and the State Department of
1666 Health may stipulate that a specified portion only of the record
1667 shall be certified to the court as the record on appeal.

1668 (c) The court may dispose of the appeal in termtime or
1669 vacation and may sustain or dismiss the appeal, modify or vacate
1670 the order complained of, in whole or in part, as the case may be;
1671 but in case the order is wholly or partly vacated, the court may
1672 also, in its discretion, remand the matter to the State Department
1673 of Health for such further proceedings, not inconsistent with the
1674 court's order, as, in the opinion of the court, justice may
1675 require. The order shall not be vacated or set aside, either in
1676 whole or in part, except for errors of law, unless the court finds
1677 that the order of the State Department of Health is not supported
1678 by substantial evidence, is contrary to the manifest weight of the



1679 evidence, is in excess of the statutory authority or jurisdiction
1680 of the State Department of Health, or violates any vested
1681 constitutional rights of any party involved in the appeal. * * *
1682 However, an order of the chancery court reversing the denial of a
1683 certificate of need by the State Department of Health shall not
1684 entitle the applicant to effectuate the certificate of need until
1685 either:

1686 (i) Such order of the chancery court has become
1687 final and has not been appealed to the Supreme Court; or

1688 (ii) The Supreme Court has entered a final order
1689 affirming the chancery court.

1690 (d) Appeals in accordance with law may be had to the
1691 Supreme Court of the State of Mississippi from any final judgment
1692 of the chancery court.

1693 (2) The provisions of this subsection (2) shall apply to any
1694 party appealing any final order of the State Department of Health
1695 pertaining to a certificate of need for any health care facility
1696 as defined in Section 41-7-173(* * *e), with the exception of any
1697 home health agency as defined in Section 41-7-173(* * *e)(ix):

1698 (a) There shall be a "stay of proceedings" of any final
1699 order issued by the State Department of Health pertaining to the
1700 issuance of a certificate of need for the establishment,
1701 construction, expansion or replacement of a health care facility
1702 for a period of thirty (30) days from the date of the order, if an
1703 existing provider located in the same service area where the



1704 health care facility is or will be located has requested a hearing
1705 during the course of review in opposition to the issuance of the
1706 certificate of need. The stay of proceedings shall expire at the
1707 termination of thirty (30) days; however, no construction,
1708 renovation or other capital expenditure that is the subject of the
1709 order shall be undertaken, no license to operate any facility that
1710 is the subject of the order shall be issued by the licensing
1711 agency, and no certification to participate in the Title XVII or
1712 Title XIX programs of the Social Security Act shall be granted,
1713 until all statutory appeals have been exhausted or the time for
1714 such appeals has expired. * * *

1715 (b) In addition to other remedies now available at law
1716 or in equity, any party aggrieved by such final order of the State
1717 Department of Health shall have the right of appeal to the
1718 Chancery Court of the First Judicial District of Hinds County,
1719 Mississippi, which appeal must be filed within twenty (20) days
1720 after the date of the final order. * * * However, * * * any
1721 appeal of an order disapproving an application for such a
1722 certificate of need may be made to the chancery court of the
1723 county where the proposed construction, expansion or alteration
1724 was to be located * * *. Such appeal must be filed in accordance
1725 with the twenty (20) days for filing as * * * provided in this
1726 paragraph. Any appeal shall state briefly the nature of the
1727 proceedings before the State Department of Health and shall
1728 specify the order complained of.



1729 (c) Upon the filing of such an appeal, the clerk of the
1730 chancery court shall serve notice thereof upon the State
1731 Department of Health, whereupon the State Department of Health
1732 shall, within thirty (30) days of the date of the filing of the
1733 appeal, certify to the chancery court the record in the case,
1734 which records shall include a transcript of all testimony,
1735 together with all exhibits or copies thereof, all proceedings,
1736 orders, findings and opinions entered in the case; * * *
1737 however, * * * the parties and the State Department of Health may
1738 stipulate that a specified portion only of the record shall be
1739 certified to the court as the record on appeal. The chancery
1740 court shall give preference to any such appeal from a final order
1741 by the State Department of Health in a certificate of need
1742 proceeding, and shall render a final order regarding such appeal
1743 no later than one hundred twenty (120) days from the date of the
1744 final order by the State Department of Health. If the chancery
1745 court has not rendered a final order within this
1746 one-hundred-twenty-day period, then the final order of the State
1747 Department of Health shall be deemed to have been affirmed by the
1748 chancery court, and any party to the appeal shall have the right
1749 to appeal from the chancery court to the Supreme Court on the
1750 record certified by the State Department of Health as otherwise
1751 provided in paragraph (g) of this subsection. * * * If the
1752 chancery court has not rendered a final order within the
1753 one-hundred-twenty-day period and an appeal is made to the Supreme



1754 Court as provided * * * in this paragraph, the Supreme Court shall
1755 remand the case to the chancery court to make an award of costs,
1756 fees, reasonable expenses and attorney's fees incurred in favor of
1757 appellee payable by the appellant(s) * * * if the Supreme Court
1758 affirms the order of the State Department of Health.

1759 (d) Any appeal of a final order by the State Department
1760 of Health in a certificate of need proceeding shall require the
1761 giving of a bond by the appellant(s) sufficient to secure the
1762 appellee against the loss of costs, fees, expenses and attorney's
1763 fees incurred in defense of the appeal, approved by the chancery
1764 court within five (5) days of the date of filing the appeal.

1765 (e) No new or additional evidence shall be introduced
1766 in the chancery court but the case shall be determined upon the
1767 record certified to the court.

1768 (f) The court may dispose of the appeal in termtime or
1769 vacation and may sustain or dismiss the appeal, modify or vacate
1770 the order complained of in whole or in part and may make an award
1771 of costs, fees, expenses and attorney's fees, as the case may be;
1772 but in case the order is wholly or partly vacated, the court may
1773 also, in its discretion, remand the matter to the State Department
1774 of Health for such further proceedings, not inconsistent with the
1775 court's order, as, in the opinion of the court, justice may
1776 require. The court, as part of the final order, shall make an
1777 award of costs, fees, reasonable expenses and attorney's fees
1778 incurred in favor of appellee payable by the appellant(s) * * * if



1779 the court affirms_u the order of the State Department of Health.
1780 The order shall not be vacated or set aside, either in whole or in
1781 part, except for errors of law, unless the court finds that the
1782 order of the State Department of Health is not supported by
1783 substantial evidence, is contrary to the manifest weight of the
1784 evidence, is in excess of the statutory authority or jurisdiction
1785 of the State Department of Health, or violates any vested
1786 constitutional rights of any party involved in the appeal. * * *
1787 However, an order of the chancery court reversing the denial of a
1788 certificate of need by the State Department of Health shall not
1789 entitle the applicant to effectuate the certificate of need until
1790 either:

1791 (i) Such order of the chancery court has become
1792 final and has not been appealed to the Supreme Court; or

1793 (ii) The Supreme Court has entered a final order
1794 affirming the chancery court.

1795 (g) Appeals in accordance with law may be had to the
1796 Supreme Court of the State of Mississippi from any final judgment
1797 of the chancery court. The Supreme Court must give preference and
1798 conduct an expedited judicial review of an appeal of a final order
1799 of the chancery court relating to a certificate of need proceeding
1800 and must render a final order regarding the appeal no later than
1801 one hundred twenty (120) days from the date the final order by the
1802 chancery court is certified to the Supreme Court. The Supreme



1803 Court shall consider such appeals in an expeditious manner without
1804 regard to position on the court docket.

1805 (h) Within thirty (30) days from the date of a final
1806 order by the Supreme Court or a final order of the chancery court
1807 not appealed to the Supreme Court that modifies or wholly or
1808 partly vacates the final order of the State Department of Health
1809 granting a certificate of need, the State Department of Health
1810 shall issue another order in conformity with the final order of
1811 the Supreme Court, or the final order of the chancery court not
1812 appealed to the Supreme Court.

1813 **SECTION 11.** Section 41-7-202, Mississippi Code of 1972, is
1814 amended as follows:

1815 41-7-202. There shall be a "stay of proceedings" of any
1816 written decision of the State Department of Health pertaining to a
1817 certificate of need for a home health agency, as defined in
1818 Section 41-7-173(* * *e)(ix), for a period of thirty (30) days
1819 from the date of that decision. The stay of proceedings shall
1820 expire at the termination of thirty (30) days; however, no license
1821 to operate any such home health agency that is the subject of the
1822 decision shall be issued by the licensing agency, and no
1823 certification for such home health agency to participate in the
1824 Title XVIII or Title XIX programs of the Social Security Act shall
1825 be granted until all statutory appeals have been exhausted or the
1826 time for such appeals has expired. The stay of proceedings
1827 provided for in this section shall not apply to any party



1828 appealing any final order of the State Department of Health
1829 pertaining to a certificate of need for any health care facility
1830 as defined in Section 41-7-173(* * *e), with the exception of any
1831 home health agency as defined in Section 41-7-173(* * *e)(ix).

1832 **SECTION 12.** Section 41-7-207, Mississippi Code of 1972, is
1833 amended as follows:

1834 41-7-207. Notwithstanding any other provisions of Sections
1835 41-7-171 through 41-7-209, except when the owner of a damaged
1836 health care facility applies to repair or rebuild the facility in
1837 accordance with the provisions of Section 41-7-191(13), when the
1838 need for any emergency replacement occurs, the certificate of need
1839 review process shall be expedited by promulgation of
1840 administrative procedures for expenditures necessary to alleviate
1841 an emergency condition and restore health care access. Emergency
1842 replacement means the replacement, and/or a necessary relocation,
1843 of all or the damaged part of the facilities * * * without which
1844 the operation of the facility and the health and safety of
1845 patients would be immediately jeopardized and health care access
1846 would be denied to such patients. Expenditures under this section
1847 shall be limited to the replacement of those necessary
1848 facilities * * * the loss of which constitutes an emergency;
1849 however, in the case of the destruction or major damage to a
1850 health care facility, the department shall be authorized to issue
1851 a certificate of need to address the current and future health
1852 care needs of the community, including, but not limited to, the



1853 expansion of the health care facility and/or the relocation of the
1854 health care facility. In exercising the authority granted in this
1855 section, the department may waive all or part of the required
1856 certificate of need application fee for any application filed
1857 under this section if the expenditure would create a further
1858 hardship or undue burden on the health care facility.

1859 **SECTION 13.** Section 41-73-5, Mississippi Code of 1972, is
1860 amended as follows:

1861 41-73-5. When used in this act, unless the context requires
1862 a different definition, the following terms shall have the
1863 following meanings:

1864 (a) "Act" means the Mississippi Hospital Equipment and
1865 Facilities Authority Act.

1866 (b) "Authority" means the Mississippi Hospital
1867 Equipment and Facilities Authority created by this act and any
1868 successor to its functions.

1869 (c) "Bonds" means bonds, notes or other evidences of
1870 indebtedness of the authority issued pursuant to this act,
1871 including refunding bonds.

1872 (d) "Cost" as applied to hospital equipment means any
1873 and all costs of such hospital equipment and, without limiting the
1874 generality of the foregoing, shall include the following:

1875 (i) All costs of the acquisition, repair,
1876 restoration, reconditioning, refinancing or installation of any
1877 such hospital equipment and all costs incident or related thereto;



1878 (ii) The cost of any property interest in such
1879 hospital equipment including an option to purchase or leasehold
1880 interest;

1881 (iii) The cost of architectural, engineering,
1882 legal and related services; the cost of the preparation of plans,
1883 specifications, studies, surveys and estimates of cost and of
1884 revenue; and all other expenses necessary or incident to planning,
1885 providing or determining the need for or the feasibility and
1886 practicability of such hospital equipment; and the cost of
1887 providing or establishing a reasonable reserve fund for the
1888 payment of principal and interest on bonds;

1889 (iv) The cost of financing charges, including
1890 premiums or prepayment penalties, if any, and interest accrued
1891 prior to the acquisition and installation or refinancing of such
1892 hospital equipment and after such acquisition and installation or
1893 refinancing and start-up costs related to hospital equipment;

1894 (v) Any and all costs paid or incurred in
1895 connection with the financing of such hospital equipment,
1896 including out-of-pocket expenses, the cost of financing, legal,
1897 accounting, financial advisory and consulting fees, expenses and
1898 disbursements; the cost of any policy of insurance; the cost of
1899 printing, engraving and reproduction services; and the cost of the
1900 initial or acceptance fee of any trustee or paying agent;

1901 (vi) All direct or indirect costs of the authority
1902 incurred in connection with providing such hospital equipment,



1903 including, without limitation, reasonable sums to reimburse the
1904 authority for time spent by its agents or employees with respect
1905 to providing such hospital equipment and the financing thereof;
1906 and

1907 (vii) Any and all costs paid or incurred for the
1908 administration of any program for the purchase or lease of or the
1909 making of loans for hospital equipment, by the authority and any
1910 program for the sale or lease of or the making of loans for such
1911 hospital equipment to any participating hospital institution.

1912 (e) "Cost," as applied to hospital facilities, means
1913 any and all costs of such hospital facilities and, without
1914 limiting the generality of the foregoing, shall include the
1915 following:

1916 (i) All costs of the establishment, demolition,
1917 site development of new and rehabilitated buildings,
1918 rehabilitation, reconstruction repair, erection, building,
1919 construction, remodeling, adding to and furnishing of any such
1920 hospital facilities and all costs incident or related thereto;

1921 (ii) The cost of acquiring any property interest
1922 in such hospital facilities including the purchase thereof, the
1923 cost of an option to purchase or the cost of any leasehold
1924 interest;

1925 (iii) The cost of architectural, engineering,
1926 legal and related services; the cost of the preparation of plans,
1927 specifications, studies, surveys and estimates of cost and of



1928 revenue; all other expenses necessary or incident to planning,
1929 providing or determining the need for or the feasibility and
1930 practicability of such hospital facilities or the acquisition
1931 thereof; and the cost of providing or establishing a reasonable
1932 reserve fund for the payment of principal of and interest on
1933 bonds;

1934 (iv) The cost of financing charges, including
1935 premiums or prepayment penalties, if any, and interest accrued
1936 prior to the acquisition and completion or refinancing of such
1937 hospital facilities and after such acquisition and completion or
1938 refinancing and start-up costs related to hospital facilities;

1939 (v) Any and all costs paid or incurred in
1940 connection with the financing of such hospital facilities,
1941 including out-of-pocket expenses, the cost of financing, legal,
1942 accounting, financial advisory and consulting fees, expenses and
1943 disbursement; the cost of any policy of insurance; the cost of
1944 printing, engraving and reproduction services; and the cost of the
1945 initial or acceptance fee of any trustee or paying agent;

1946 (vi) All direct or indirect costs of the authority
1947 incurred in connection with providing such hospital facilities,
1948 including, without limitation, reasonable sums to reimburse the
1949 authority for time spent by its agents or employees with respect
1950 to providing such hospital facilities and the financing thereof;

1951 (vii) Any and all costs paid or incurred for the
1952 administration of any program for the purchase or lease of or the



1953 making of loans for hospital facilities, by the authority and any
1954 program for the sale or lease of or the making of loans for such
1955 hospital facilities to any participating hospital institution; and

1956 (viii) The cost of providing for the payment or
1957 the making provision for the payment of, by the appropriate
1958 escrowing of monies or securities, the principal of and interest
1959 on which when due will be adequate to make such payment, any
1960 indebtedness encumbering the revenues or property of a
1961 participating hospital institution, whether such payment is to be
1962 effected by redemption of such indebtedness prior to maturity or
1963 not.

1964 (f) "Hospital equipment" means any personal property
1965 which is found and determined by the authority to be required or
1966 necessary or helpful for medical care, research, training or
1967 teaching, any one (1) or all, in hospital facilities located in
1968 the state, irrespective of whether such property is in existence
1969 at the time of, or is to be provided after the making of, such
1970 finding. * * *

1971 (g) "Hospital facility" or "hospital facilities" means
1972 buildings and structures of any and all types used or useful, in
1973 the discretion of the authority, for providing any types of care
1974 to the sick, wounded, infirmed, needy, mentally incompetent or
1975 elderly and shall include, without limiting the generality of the
1976 foregoing, out-patient clinics, laboratories, laundries, nurses',
1977 doctors' or interns' residences, administration buildings, office



1978 buildings, facilities for research directly involved with hospital
1979 care, maintenance, storage or utility facilities, parking lots,
1980 and garages and all necessary, useful, or related furnishings, and
1981 appurtenances and all lands necessary or convenient as a site for
1982 the foregoing.

1983 (h) "Participating hospital institution" or "hospital
1984 institution" means a public or private corporation, association,
1985 foundation, trust, cooperative, agency, body politic, or other
1986 person or organization which provides or operates or proposes to
1987 provide or operate hospital facilities not for profit, and which,
1988 pursuant to the provisions of this act, contracts with the
1989 authority for the financing or refinancing of the lease or other
1990 acquisition of hospital equipment or hospital facilities, or both.

1991 (i) "State" means the State of Mississippi.

1992 The use of singular terms herein shall also include the
1993 plural of such term and the use of a plural term herein shall also
1994 include the singular of such term unless the context clearly
1995 requires a different connotation.

1996 **SECTION 14.** This act shall take effect and be in force from
1997 and after July 1, 2022.

