REGULAR SESSION 2025

MISSISSIPPI LEGISLATURE

By: Representative Barton

To: Public Health and Human Services

HOUSE BILL NO. 587

1 AN ACT TO AMEND SECTIONS 41-7-173 AND 41-7-191, MISSISSIPPI 2

CODE OF 1972, TO REMOVE INTERMEDIATE CARE FACILITIES FOR

3 INDIVIDUALS WITH INTELLECTUAL DISABILITIES FROM THE HEALTH CARE

CERTIFICATE OF NEED LAW; AND FOR RELATED PURPOSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 5

SECTION 1. Section 41-7-173, Mississippi Code of 1972, is 6

7 amended as follows:

41-7-173. For the purposes of Section 41-7-171 et seq., the 8

9 following words shall have the meanings ascribed herein, unless

10 the context otherwise requires:

11 "Affected person" means (i) the applicant; (ii) a

12 person residing within the geographic area to be served by the

applicant's proposal; (iii) a person who regularly uses health 13

14 care facilities or HMOs located in the geographic area of the

proposal which provide similar service to that which is proposed; 15

(iv) health care facilities and HMOs which have, prior to receipt 16

17 of the application under review, formally indicated an intention

to provide service similar to that of the proposal being 18

19 considered at a future date; (v) third-party payers who reimburse

- 20 health care facilities located in the geographical area of the
- 21 proposal; or (vi) any agency that establishes rates for health
- 22 care services or HMOs located in the geographic area of the
- 23 proposal.
- 24 (b) "Certificate of need" means a written order of the
- 25 State Department of Health setting forth the affirmative finding
- 26 that a proposal in prescribed application form, sufficiently
- 27 satisfies the plans, standards and criteria prescribed for such
- 28 service or other project by Section 41-7-171 et seq., and by rules
- 29 and regulations promulgated thereunder by the State Department of
- 30 Health.
- 31 (c) (i) "Capital expenditure," when pertaining to
- 32 defined major medical equipment, shall mean an expenditure which,
- 33 under generally accepted accounting principles consistently
- 34 applied, is not properly chargeable as an expense of operation and
- 35 maintenance and which exceeds One Million Five Hundred Thousand
- 36 Dollars (\$1,500,000.00).
- 37 (ii) "Capital expenditure," when pertaining to
- 38 other than major medical equipment, shall mean any expenditure
- 39 which under generally accepted accounting principles consistently
- 40 applied is not properly chargeable as an expense of operation and
- 41 maintenance and which exceeds, for clinical health services, as
- 42 defined in paragraph (k) below, Five Million Dollars
- 43 (\$5,000,000.00), adjusted for inflation as published by the State
- 44 Department of Health or which exceeds, for nonclinical health

- 45 services, as defined in paragraph (k) below, Ten Million Dollars
- 46 (\$10,000,000.00), adjusted for inflation as published by the State
- 47 Department of Health.
- 48 (iii) A "capital expenditure" shall include the
- 49 acquisition, whether by lease, sufferance, gift, devise, legacy,
- 50 settlement of a trust or other means, of any facility or part
- 51 thereof, or equipment for a facility, the expenditure for which
- 52 would have been considered a capital expenditure if acquired by
- 53 purchase. Transactions which are separated in time but are
- 54 planned to be undertaken within twelve (12) months of each other
- and are components of an overall plan for meeting patient care
- 56 objectives shall, for purposes of this definition, be viewed in
- 57 their entirety without regard to their timing.
- 58 (iv) In those instances where a health care
- 59 facility or other provider of health services proposes to provide
- 60 a service in which the capital expenditure for major medical
- 61 equipment or other than major medical equipment or a combination
- 62 of the two (2) may have been split between separate parties, the
- 63 total capital expenditure required to provide the proposed service
- 64 shall be considered in determining the necessity of certificate of
- 65 need review and in determining the appropriate certificate of need
- 66 review fee to be paid. The capital expenditure associated with
- 67 facilities and equipment to provide services in Mississippi shall
- 68 be considered regardless of where the capital expenditure was
- 69 made, in state or out of state, and regardless of the domicile of

- 70 the party making the capital expenditure, in state or out of 71 state.
- 72 (d) "Change of ownership" includes, but is not limited
- 73 to, inter vivos gifts, purchases, transfers, lease arrangements,
- 74 cash and/or stock transactions or other comparable arrangements
- 75 whenever any person or entity acquires or controls a majority
- 76 interest of an existing health care facility, and/or the change of
- 77 ownership of major medical equipment, a health service, or an
- 78 institutional health service. Changes of ownership from
- 79 partnerships, single proprietorships or corporations to another
- 80 form of ownership are specifically included. However, "change of
- 81 ownership" shall not include any inherited interest acquired as a
- 82 result of a testamentary instrument or under the laws of descent
- 83 and distribution of the State of Mississippi.
- 84 (e) "Commencement of construction" means that all of
- 85 the following have been completed with respect to a proposal or
- 86 project proposing construction, renovating, remodeling or
- 87 alteration:
- 88 (i) A legally binding written contract has been
- 89 consummated by the proponent and a lawfully licensed contractor to
- 90 construct and/or complete the intent of the proposal within a
- 91 specified period of time in accordance with final architectural
- 92 plans which have been approved by the licensing authority of the
- 93 State Department of Health;

94 (ii)	Any and al	l permits and/or	approvals deemed
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- 95 lawfully necessary by all authorities with responsibility for such
- 96 have been secured; and
- 97 (iii) Actual bona fide undertaking of the subject
- 98 proposal has commenced, and a progress payment of at least one
- 99 percent (1%) of the total cost price of the contract has been paid
- 100 to the contractor by the proponent, and the requirements of this
- 101 paragraph (e) have been certified to in writing by the State
- 102 Department of Health.
- Force account expenditures, such as deposits, securities,
- 104 bonds, et cetera, may, in the discretion of the State Department
- 105 of Health, be excluded from any or all of the provisions of
- 106 defined commencement of construction.
- 107 (f) "Consumer" means an individual who is not a
- 108 provider of health care as defined in paragraph (q) of this
- 109 section.
- 110 (g) "Develop," when used in connection with health
- 111 services, means to undertake those activities which, on their
- 112 completion, will result in the offering of a new institutional
- 113 health service or the incurring of a financial obligation as
- 114 defined under applicable state law in relation to the offering of
- 115 such services.
- 116 (h) "Health care facility" includes hospitals,
- 117 psychiatric hospitals, chemical dependency hospitals, skilled
- 118 nursing facilities, end-stage renal disease (ESRD) facilities,

	119 including freestanding hemodialysis units, intermediate c	care
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- 120 facilities, ambulatory surgical facilities, * * * home health
- 121 agencies, psychiatric residential treatment facilities, pediatric
- 122 skilled nursing facilities, long-term care hospitals,
- 123 comprehensive medical rehabilitation facilities, including
- 124 facilities owned or operated by the state or a political
- 125 subdivision or instrumentality of the state, but does not include
- 126 Christian Science sanatoriums operated or listed and certified by
- 127 the First Church of Christ, Scientist, Boston, Massachusetts.
- 128 This definition shall not apply to facilities for the private
- 129 practice, either independently or by incorporated medical groups,
- 130 of physicians, dentists or health care professionals except where
- 131 such facilities are an integral part of an institutional health
- 132 service. The various health care facilities listed in this
- 133 paragraph shall be defined as follows:
- 134 (i) "Hospital" means an institution which is
- 135 primarily engaged in providing to inpatients, by or under the
- 136 supervision of physicians, diagnostic services and therapeutic
- 137 services for medical diagnosis, treatment and care of injured,
- 138 disabled or sick persons, or rehabilitation services for the
- 139 rehabilitation of injured, disabled or sick persons. Such term
- 140 does not include psychiatric hospitals.
- 141 (ii) "Psychiatric hospital" means an institution
- 142 which is primarily engaged in providing to inpatients, by or under

143	the	supervision	of	a	physician,	psychiatric	services	for	the
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- 144 diagnosis and treatment of persons with mental illness.
- 145 (iii) "Chemical dependency hospital" means an
- 146 institution which is primarily engaged in providing to inpatients,
- 147 by or under the supervision of a physician, medical and related
- 148 services for the diagnosis and treatment of chemical dependency
- 149 such as alcohol and drug abuse.
- 150 (iv) "Skilled nursing facility" means an
- 151 institution or a distinct part of an institution which is
- 152 primarily engaged in providing to inpatients skilled nursing care
- and related services for patients who require medical or nursing
- 154 care or rehabilitation services for the rehabilitation of injured,
- 155 disabled or sick persons.
- 156 (v) "End-stage renal disease (ESRD) facilities"
- 157 means kidney disease treatment centers, which includes
- 158 freestanding hemodialysis units and limited care facilities. The
- 159 term "limited care facility" generally refers to an
- 160 off-hospital-premises facility, regardless of whether it is
- 161 provider or nonprovider operated, which is engaged primarily in
- 162 furnishing maintenance hemodialysis services to stabilized
- 163 patients.
- 164 (vi) "Intermediate care facility" means an
- 165 institution which provides, on a regular basis, health-related
- 166 care and services to individuals who do not require the degree of
- 167 care and treatment which a hospital or skilled nursing facility is

168	designed to	o provide	, but	who, bec	ause of	f their	mental	or ph	ıysical
169	condition,	require	healt!	h-related	care a	and serv	zices (a	above	the

170 level of room and board).

171 (vii) "Ambulatory surgical facility" means a 172 facility primarily organized or established for the purpose of

173 performing surgery for outpatients and is a separate identifiable

174 legal entity from any other health care facility. Such term does

175 not include the offices of private physicians or dentists, whether

176 for individual or group practice, and does not include any

177 abortion facility as defined in Section 41-75-1(f).

178 (viii) * * * [Deleted]

following services or items:

179 "Home health agency" means a public or 180 privately owned agency or organization, or a subdivision of such 181 an agency or organization, properly authorized to conduct business 182 in Mississippi, which is primarily engaged in providing to 183 individuals at the written direction of a licensed physician, in 184 the individual's place of residence, skilled nursing services provided by or under the supervision of a registered nurse 185 186 licensed to practice in Mississippi, and one or more of the

188 1. Physical, occupational or speech therapy;

2. Medical social services;

190 3. Part-time or intermittent services of a

191 home health aide;

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192	4. Other services as approved by the
193	licensing agency for home health agencies;
194	5. Medical supplies, other than drugs and
195	biologicals, and the use of medical appliances; or
196	6. Medical services provided by an intern or
197	resident-in-training at a hospital under a teaching program of
198	such hospital.
199	Further, all skilled nursing services and those services
200	listed in items 1 through 4 of this subparagraph (ix) must be
201	provided directly by the licensed home health agency. For
202	purposes of this subparagraph, "directly" means either through an
203	agency employee or by an arrangement with another individual not
204	defined as a health care facility.
205	This subparagraph (ix) shall not apply to health care
206	facilities which had contracts for the above services with a home
207	health agency on January 1, 1990.
208	(x) "Psychiatric residential treatment facility"
209	means any nonhospital establishment with permanent licensed
210	facilities which provides a twenty-four-hour program of care by
211	qualified therapists, including, but not limited to, duly licensed
212	mental health professionals, psychiatrists, psychologists,
213	psychotherapists and licensed certified social workers, for
214	emotionally disturbed children and adolescents referred to such
215	facility by a court, local school district or by the Department of
216	Human Services, who are not in an acute phase of illness requiring

PAGE 9 (RF\KW)

217	the	services	of	a psychi	latric	hospital,	and	are	in	need	of	suc	h

- 218 restorative treatment services. For purposes of this
- 219 subparagraph, the term "emotionally disturbed" means a condition
- 220 exhibiting one or more of the following characteristics over a
- 221 long period of time and to a marked degree, which adversely
- 222 affects educational performance:
- 223 1. An inability to learn which cannot be
- 224 explained by intellectual, sensory or health factors;
- 225 2. An inability to build or maintain
- 226 satisfactory relationships with peers and teachers;
- 3. Inappropriate types of behavior or
- 228 feelings under normal circumstances;
- 4. A general pervasive mood of unhappiness or
- 230 depression; or
- 231 5. A tendency to develop physical symptoms or
- 232 fears associated with personal or school problems. An
- 233 establishment furnishing primarily domiciliary care is not within
- 234 this definition.
- 235 (xi) "Pediatric skilled nursing facility" means an
- 236 institution or a distinct part of an institution that is primarily
- 237 engaged in providing to inpatients skilled nursing care and
- 238 related services for persons under twenty-one (21) years of age
- 239 who require medical or nursing care or rehabilitation services for
- 240 the rehabilitation of injured, disabled or sick persons.

241	(xii) "Long-term care hospital" means a
242	freestanding, Medicare-certified hospital that has an average
243	length of inpatient stay greater than twenty-five (25) days, which
244	is primarily engaged in providing chronic or long-term medical
245	care to patients who do not require more than three (3) hours of
246	rehabilitation or comprehensive rehabilitation per day, and has a
247	transfer agreement with an acute care medical center and a
248	comprehensive medical rehabilitation facility. Long-term care
249	hospitals shall not use rehabilitation, comprehensive medical
250	rehabilitation, medical rehabilitation, sub-acute rehabilitation,
251	nursing home, skilled nursing facility or sub-acute care facility
252	in association with its name.
253	(xiii) "Comprehensive medical rehabilitation
254	facility" means a hospital or hospital unit that is licensed
255	and/or certified as a comprehensive medical rehabilitation
256	facility which provides specialized programs that are accredited
257	by the Commission on Accreditation of Rehabilitation Facilities
258	and supervised by a physician board certified or board eligible in
259	physiatry or other doctor of medicine or osteopathy with at least
260	two (2) years of training in the medical direction of a
261	comprehensive rehabilitation program that:
262	1. Includes evaluation and treatment of
263	individuals with physical disabilities;
264	2. Emphasizes education and training of
265	individuals with disabilities;

266	3. Incorporates at least the following core
267	disciplines:
268	a. Physical Therapy;
269	b. Occupational Therapy;
270	c. Speech and Language Therapy;
271	d. Rehabilitation Nursing; and
272	4. Incorporates at least three (3) of the
273	following disciplines:
274	a. Psychology;
275	b. Audiology;
276	c. Respiratory Therapy;
277	d. Therapeutic Recreation;
278	e. Orthotics;
279	f. Prosthetics;
280	g. Special Education;
281	h. Vocational Rehabilitation;
282	i. Psychotherapy;
283	j. Social Work;
284	k. Rehabilitation Engineering.
285	These specialized programs include, but are not limited to:
286	spinal cord injury programs, head injury programs and infant and
287	early childhood development programs.
288	(i) "Health maintenance organization" or "HMO" means a
289	public or private organization organized under the laws of this
290	state or the federal government which:

291	(1) Provides or otherwise makes available to
292	enrolled participants health care services, including
293	substantially the following basic health care services: usual
294	physician services, hospitalization, laboratory, x-ray, emergency
295	and preventive services, and out-of-area coverage;
296	(ii) Is compensated (except for copayments) for
297	the provision of the basic health care services listed in
298	subparagraph (i) of this paragraph to enrolled participants on a
299	predetermined basis; and
300	(iii) Provides physician services primarily:
301	1. Directly through physicians who are either
302	employees or partners of such organization; or
303	2. Through arrangements with individual
304	physicians or one or more groups of physicians (organized on a
305	group practice or individual practice basis).
306	(j) "Health service area" means a geographic area of
307	the state designated in the State Health Plan as the area to be
308	used in planning for specified health facilities and services and
309	to be used when considering certificate of need applications to
310	provide health facilities and services.
311	(k) "Health services" means clinically related (i.e.,
312	diagnostic, treatment or rehabilitative) services and includes
313	alcohol, drug abuse, mental health and home health care services.
314	"Clinical health services" shall only include those activities
315	which contemplate any change in the existing bed complement of any

316	health care facility through the addition or conversion of any
317	beds, under Section 41-7-191(1)(c) or propose to offer any health
318	services if those services have not been provided on a regular
319	basis by the proposed provider of such services within the period
320	of twelve (12) months prior to the time such services would be
321	offered, under Section 41-7-191(1)(d). "Nonclinical health
322	services" shall be all other services which do not involve any
323	change in the existing bed complement or offering health services
324	as described above.

- 325 (1) "Institutional health services" shall mean health 326 services provided in or through health care facilities and shall 327 include the entities in or through which such services are 328 provided.
- 329 "Major medical equipment" means medical equipment 330 designed for providing medical or any health-related service which 331 costs in excess of One Million Five Hundred Thousand Dollars (\$1,500,000.00). However, this definition shall not be applicable 332 333 to clinical laboratories if they are determined by the State 334 Department of Health to be independent of any physician's office, 335 hospital or other health care facility or otherwise not so defined 336 by federal or state law, or rules and regulations promulgated 337 thereunder.
- 338 (n) "State Department of Health" or "department" shall
 339 mean the state agency created under Section 41-3-15, which shall

340	be	considered	to	be	the	State	Health	Planning	and	Develo	pment

- 341 Agency, as defined in paragraph (u) of this section.
- 342 (o) "Offer," when used in connection with health
- 343 services, means that it has been determined by the State
- 344 Department of Health that the health care facility is capable of
- 345 providing specified health services.
- 346 (p) "Person" means an individual, a trust or estate,
- 347 partnership, corporation (including associations, joint-stock
- 348 companies and insurance companies), the state or a political
- 349 subdivision or instrumentality of the state.
- 350 (q) "Provider" shall mean any person who is a provider
- 351 or representative of a provider of health care services requiring
- 352 a certificate of need under Section 41-7-171 et seq., or who has
- 353 any financial or indirect interest in any provider of services.
- 354 (r) "Radiation therapy services" means the treatment of
- 355 cancer and other diseases using ionizing radiation of either high
- 356 energy photons (x-rays or gamma rays) or charged particles
- 357 (electrons, protons or heavy nuclei). However, for purposes of a
- 358 certificate of need, radiation therapy services shall not include
- 359 low energy, superficial, external beam x-ray treatment of
- 360 superficial skin lesions.
- 361 (s) "Secretary" means the Secretary of Health and Human
- 362 Services, and any officer or employee of the Department of Health
- 363 and Human Services to whom the authority involved has been
- 364 delegated.

365	(t) "State Health Plan" means the sole and official
366	statewide health plan for Mississippi which identifies priority
367	state health needs and establishes standards and criteria for
368	health-related activities which require certificate of need review
369	in compliance with Section 41-7-191.

- "State Health Planning and Development Agency" 370 (u) means the agency of state government designated to perform health 371 372 planning and resource development programs for the State of 373 Mississippi.
- 374 Section 41-7-191, Mississippi Code of 1972, is SECTION 2. 375 amended as follows:
- 376 (1) No person shall engage in any of the 41-7-191. 377 following activities without obtaining the required certificate of 378 need:
- 379 The construction, development or other 380 establishment of a new health care facility, which establishment 381 shall include the reopening of a health care facility that has 382 ceased to operate for a period of sixty (60) months or more;
- 383 (b) The relocation of a health care facility or portion 384 thereof, or major medical equipment, unless such relocation of a 385 health care facility or portion thereof, or major medical 386 equipment, which does not involve a capital expenditure by or on 387 behalf of a health care facility, is within five thousand two 388 hundred eighty (5,280) feet from the main entrance of the health 389 care facility;

25/HR26/R1199 PAGE 16 (RF\KW)

390	(c) Any change in the existing bed complement of any
391	health care facility through the addition or conversion of any
392	beds or the alteration, modernizing or refurbishing of any unit or
393	department in which the beds may be located; however, if a health
394	care facility has voluntarily delicensed some of its existing bed
395	complement, it may later relicense some or all of its delicensed
396	beds without the necessity of having to acquire a certificate of
397	need. The State Department of Health shall maintain a record of
398	the delicensing health care facility and its voluntarily
399	delicensed beds and continue counting those beds as part of the
400	state's total bed count for health care planning purposes. If a
401	health care facility that has voluntarily delicensed some of its
402	beds later desires to relicense some or all of its voluntarily
403	delicensed beds, it shall notify the State Department of Health of
404	its intent to increase the number of its licensed beds. The State
405	Department of Health shall survey the health care facility within
406	thirty (30) days of that notice and, if appropriate, issue the
407	health care facility a new license reflecting the new contingent
408	of beds. However, in no event may a health care facility that has
409	voluntarily delicensed some of its beds be reissued a license to
410	operate beds in excess of its bed count before the voluntary
411	delicensure of some of its beds without seeking certificate of
412	need approval;

(d)

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Offering of the following health services if those

services have not been provided on a regular basis by the proposed

415	provider of such services within the period of twelve (12) months
416	prior to the time such services would be offered:
417	(i) Open-heart surgery services;
418	(ii) Cardiac catheterization services;
419	(iii) Comprehensive inpatient rehabilitation
420	services;
421	(iv) Licensed psychiatric services;
422	(v) Licensed chemical dependency services;
423	(vi) Radiation therapy services;
424	(vii) Diagnostic imaging services of an invasive
425	nature, i.e. invasive digital angiography;
426	(viii) Nursing home care as defined in
427	subparagraphs (iv) * * * <u>and</u> (vi) * * * of Section 41-7-173(h);
428	(ix) Home health services;
429	(x) Swing-bed services;
430	(xi) Ambulatory surgical services;
431	(xii) Magnetic resonance imaging services;
432	(xiii) [Deleted]
433	(xiv) Long-term care hospital services;
434	(xv) Positron emission tomography (PET) services;
435	(e) The relocation of one or more health services from
436	one physical facility or site to another physical facility or
437	site, unless such relocation, which does not involve a capital
438	expenditure by or on behalf of a health care facility, (i) is to a
439	physical facility or site within five thousand two hundred eighty

(5,280) feet from the main entrance of the health care facility where the health care service is located, or (ii) is the result of an order of a court of appropriate jurisdiction or a result of pending litigation in such court, or by order of the State Department of Health, or by order of any other agency or legal entity of the state, the federal government, or any political subdivision of either, whose order is also approved by the State Department of Health;

medical equipment for the provision of medical services; however,

(i) the acquisition of any major medical equipment used only for research purposes, and (ii) the acquisition of major medical equipment to replace medical equipment for which a facility is already providing medical services and for which the State

Department of Health has been notified before the date of such acquisition shall be exempt from this paragraph; an acquisition for less than fair market value must be reviewed, if the acquisition at fair market value would be subject to review;

(g) Changes of ownership of existing health care facilities in which a notice of intent is not filed with the State Department of Health at least thirty (30) days prior to the date such change of ownership occurs, or a change in services or bed capacity as prescribed in paragraph (c) or (d) of this subsection as a result of the change of ownership; an acquisition for less

- 464 than fair market value must be reviewed, if the acquisition at
- 465 fair market value would be subject to review;
- (h) The change of ownership of any health care facility
- 467 defined in subparagraphs (iv) * * * and (vi) * * * of Section
- 468 41-7-173(h), in which a notice of intent as described in paragraph
- 469 (g) has not been filed and if the Executive Director, Division of
- 470 Medicaid, Office of the Governor, has not certified in writing
- 471 that there will be no increase in allowable costs to Medicaid from
- 472 revaluation of the assets or from increased interest and
- 473 depreciation as a result of the proposed change of ownership;
- (i) Any activity described in paragraphs (a) through
- 475 (h) if undertaken by any person if that same activity would
- 476 require certificate of need approval if undertaken by a health
- 477 care facility;
- 478 (j) Any capital expenditure or deferred capital
- 479 expenditure by or on behalf of a health care facility not covered
- 480 by paragraphs (a) through (h);
- 481 (k) The contracting of a health care facility as
- 482 defined in subparagraphs (i) through (viii) of Section 41-7-173(h)
- 483 to establish a home office, subunit, or branch office in the space
- 484 operated as a health care facility through a formal arrangement
- 485 with an existing health care facility as defined in subparagraph
- 486 (ix) of Section 41-7-173 (h);
- 487 (1) The replacement or relocation of a health care
- 488 facility designated as a critical access hospital shall be exempt

- from subsection (1) of this section so long as the critical access
 hospital complies with all applicable federal law and regulations
 regarding such replacement or relocation;
- 492 (m) Reopening a health care facility that has ceased to
 493 operate for a period of sixty (60) months or more, which reopening
 494 requires a certificate of need for the establishment of a new
 495 health care facility.
- for or issue a certificate of need to any person proposing the new construction of, addition to, or expansion of any health care facility defined in subparagraphs (iv) (skilled nursing facility) and (vi) (intermediate care facility) of Section 41-7-173(h) or the conversion of vacant hospital beds to provide skilled or intermediate nursing home care, except as hereinafter authorized:
 - (a) The department may issue a certificate of need to any person proposing the new construction of any health care facility defined in subparagraphs (iv) and (vi) of Section 41-7-173(h) as part of a life care retirement facility, in any county bordering on the Gulf of Mexico in which is located a National Aeronautics and Space Administration facility, not to exceed forty (40) beds. From and after July 1, 1999, there shall be no prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et seq.) for the beds in the health care facility that were authorized under this paragraph (a).

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514	Harrison County to provide skilled nursing home care for
515	Alzheimer's disease patients and other patients, not to exceed one
516	hundred fifty (150) beds. From and after July 1, 1999, there
517	shall be no prohibition or restrictions on participation in the
518	Medicaid program (Section 43-13-101 et seq.) for the beds in the
519	nursing facilities that were authorized under this paragraph (b).
520	(c) The department may issue a certificate of need for
521	the addition to or expansion of any skilled nursing facility that
522	is part of an existing continuing care retirement community
523	located in Madison County, provided that the recipient of the
524	certificate of need agrees in writing that the skilled nursing
525	facility will not at any time participate in the Medicaid program
526	(Section 43-13-101 et seq.) or admit or keep any patients in the
527	skilled nursing facility who are participating in the Medicaid
528	program. This written agreement by the recipient of the
529	certificate of need shall be fully binding on any subsequent owner
530	of the skilled nursing facility, if the ownership of the facility
531	is transferred at any time after the issuance of the certificate
532	of need. Agreement that the skilled nursing facility will not
533	participate in the Medicaid program shall be a condition of the
534	issuance of a certificate of need to any person under this
535	paragraph (c), and if such skilled nursing facility at any time
536	after the issuance of the certificate of need, regardless of the
537	ownership of the facility, participates in the Medicaid program or

The department may issue certificates of need in

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(b)

538 admits or keeps any patients in the facility who are participating 539 in the Medicaid program, the State Department of Health shall revoke the certificate of need, if it is still outstanding, and 540 shall deny or revoke the license of the skilled nursing facility, 541 542 at the time that the department determines, after a hearing 543 complying with due process, that the facility has failed to comply 544 with any of the conditions upon which the certificate of need was 545 issued, as provided in this paragraph and in the written agreement 546 by the recipient of the certificate of need. The total number of 547 beds that may be authorized under the authority of this paragraph 548 (c) shall not exceed sixty (60) beds.

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

 certificate of need for the construction of a nursing facility or

 the conversion of beds to nursing facility beds at a personal care

 facility for the elderly in Lowndes County that is owned and

 operated by a Mississippi nonprofit corporation, not to exceed

 sixty (60) beds. From and after July 1, 1999, there shall be no

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prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et seq.) for the beds in the nursing facility that were authorized under this paragraph (e).

- 566 (f) The State Department of Health may issue a certificate of need for conversion of a county hospital facility 567 568 in Itawamba County to a nursing facility, not to exceed sixty (60) 569 beds, including any necessary construction, renovation or expansion. From and after July 1, 1999, there shall be no 570 571 prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et seq.) for the beds in the nursing 572 573 facility that were authorized under this paragraph (f).
 - certificate of need for the construction or expansion of nursing facility beds or the conversion of other beds to nursing facility beds in either Hinds, Madison or Rankin County, not to exceed sixty (60) beds. From and after July 1, 1999, there shall be no prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et seq.) for the beds in the nursing facility that were authorized under this paragraph (g).
- (h) The State Department of Health may issue a certificate of need for the construction or expansion of nursing facility beds or the conversion of other beds to nursing facility beds in either Hancock, Harrison or Jackson County, not to exceed sixty (60) beds. From and after July 1, 1999, there shall be no prohibition or restrictions on participation in the Medicaid

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program (Section 43-13-101 et seq.) for the beds in the facility that were authorized under this paragraph (h).

590 The department may issue a certificate of need for (i) 591 the new construction of a skilled nursing facility in Leake 592 County, provided that the recipient of the certificate of need 593 agrees in writing that the skilled nursing facility will not at 594 any time participate in the Medicaid program (Section 43-13-101 et 595 seq.) or admit or keep any patients in the skilled nursing 596 facility who are participating in the Medicaid program. 597 written agreement by the recipient of the certificate of need 598 shall be fully binding on any subsequent owner of the skilled 599 nursing facility, if the ownership of the facility is transferred 600 at any time after the issuance of the certificate of need. 601 Agreement that the skilled nursing facility will not participate 602 in the Medicaid program shall be a condition of the issuance of a 603 certificate of need to any person under this paragraph (i), and if 604 such skilled nursing facility at any time after the issuance of 605 the certificate of need, regardless of the ownership of the 606 facility, participates in the Medicaid program or admits or keeps 607 any patients in the facility who are participating in the Medicaid 608 program, the State Department of Health shall revoke the certificate of need, if it is still outstanding, and shall deny or 609 610 revoke the license of the skilled nursing facility, at the time 611 that the department determines, after a hearing complying with due process, that the facility has failed to comply with any of the 612

613 conditions upon which the certificate of need was issued, as 614 provided in this paragraph and in the written agreement by the recipient of the certificate of need. The provision of Section 615 616 41-7-193(1) regarding substantial compliance of the projection of 617 need as reported in the current State Health Plan is waived for 618 the purposes of this paragraph. The total number of nursing 619 facility beds that may be authorized by any certificate of need 620 issued under this paragraph (i) shall not exceed sixty (60) beds. 621 If the skilled nursing facility authorized by the certificate of 622 need issued under this paragraph is not constructed and fully operational within eighteen (18) months after July 1, 1994, the 623 624 State Department of Health, after a hearing complying with due 625 process, shall revoke the certificate of need, if it is still 626 outstanding, and shall not issue a license for the skilled nursing 627 facility at any time after the expiration of the eighteen-month 628 period.

629 The department may issue certificates of need to (i) 630 allow any existing freestanding long-term care facility in 631 Tishomingo County and Hancock County that on July 1, 1995, is 632 licensed with fewer than sixty (60) beds. For the purposes of 633 this paragraph (j), the provisions of Section 41-7-193(1) 634 requiring substantial compliance with the projection of need as 635 reported in the current State Health Plan are waived. From and 636 after July 1, 1999, there shall be no prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et 637

638 seq.) for the beds in the long-term care facilities that were 639 authorized under this paragraph (j).

640 The department may issue a certificate of need for the construction of a nursing facility at a continuing care 641 642 retirement community in Lowndes County. The total number of beds 643 that may be authorized under the authority of this paragraph (k) 644 shall not exceed sixty (60) beds. From and after July 1, 2001, 645 the prohibition on the facility participating in the Medicaid 646 program (Section 43-13-101 et seq.) that was a condition of 647 issuance of the certificate of need under this paragraph (k) shall 648 be revised as follows: The nursing facility may participate in 649 the Medicaid program from and after July 1, 2001, if the owner of 650 the facility on July 1, 2001, agrees in writing that no more than 651 thirty (30) of the beds at the facility will be certified for 652 participation in the Medicaid program, and that no claim will be 653 submitted for Medicaid reimbursement for more than thirty (30) 654 patients in the facility in any month or for any patient in the 655 facility who is in a bed that is not Medicaid-certified. This 656 written agreement by the owner of the facility shall be a 657 condition of licensure of the facility, and the agreement shall be 658 fully binding on any subsequent owner of the facility if the 659 ownership of the facility is transferred at any time after July 1, 660 2001. After this written agreement is executed, the Division of 661 Medicaid and the State Department of Health shall not certify more 662 than thirty (30) of the beds in the facility for participation in

the Medicaid program. If the facility violates the terms of the
written agreement by admitting or keeping in the facility on a
regular or continuing basis more than thirty (30) patients who are
participating in the Medicaid program, the State Department of
Health shall revoke the license of the facility, at the time that
the department determines, after a hearing complying with due
process, that the facility has violated the written agreement.

- (1) Provided that funds are specifically appropriated therefor by the Legislature, the department may issue a certificate of need to a rehabilitation hospital in Hinds County for the construction of a sixty-bed long-term care nursing facility dedicated to the care and treatment of persons with severe disabilities including persons with spinal cord and closed-head injuries and ventilator dependent patients. The provisions of Section 41-7-193(1) regarding substantial compliance with projection of need as reported in the current State Health Plan are waived for the purpose of this paragraph.
- 680 The State Department of Health may issue a (m) 681 certificate of need to a county-owned hospital in the Second 682 Judicial District of Panola County for the conversion of not more 683 than seventy-two (72) hospital beds to nursing facility beds, 684 provided that the recipient of the certificate of need agrees in 685 writing that none of the beds at the nursing facility will be 686 certified for participation in the Medicaid program (Section 687 43-13-101 et seq.), and that no claim will be submitted for

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688 Medicaid reimbursement in the nursing facility in any day or for 689 any patient in the nursing facility. This written agreement by 690 the recipient of the certificate of need shall be a condition of 691 the issuance of the certificate of need under this paragraph, and 692 the agreement shall be fully binding on any subsequent owner of 693 the nursing facility if the ownership of the nursing facility is 694 transferred at any time after the issuance of the certificate of 695 need. After this written agreement is executed, the Division of 696 Medicaid and the State Department of Health shall not certify any of the beds in the nursing facility for participation in the 697 698 Medicaid program. If the nursing facility violates the terms of 699 the written agreement by admitting or keeping in the nursing 700 facility on a regular or continuing basis any patients who are 701 participating in the Medicaid program, the State Department of 702 Health shall revoke the license of the nursing facility, at the 703 time that the department determines, after a hearing complying 704 with due process, that the nursing facility has violated the 705 condition upon which the certificate of need was issued, as 706 provided in this paragraph and in the written agreement. If the 707 certificate of need authorized under this paragraph is not issued 708 within twelve (12) months after July 1, 2001, the department shall 709 deny the application for the certificate of need and shall not 710 issue the certificate of need at any time after the twelve-month 711 period, unless the issuance is contested. If the certificate of 712 need is issued and substantial construction of the nursing

713 facility beds has not commenced within eighteen (18) months after

714 July 1, 2001, the State Department of Health, after a hearing

715 complying with due process, shall revoke the certificate of need

716 if it is still outstanding, and the department shall not issue a

717 license for the nursing facility at any time after the

718 eighteen-month period. However, if the issuance of the

719 certificate of need is contested, the department shall require

720 substantial construction of the nursing facility beds within six

721 (6) months after final adjudication on the issuance of the

722 certificate of need.

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(n) The department may issue a certificate of need for the new construction, addition or conversion of skilled nursing facility beds in Madison County, provided that the recipient of the certificate of need agrees in writing that the skilled nursing facility will not at any time participate in the Medicaid program (Section 43-13-101 et seq.) or admit or keep any patients in the skilled nursing facility who are participating in the Medicaid program. This written agreement by the recipient of the certificate of need shall be fully binding on any subsequent owner of the skilled nursing facility, if the ownership of the facility is transferred at any time after the issuance of the certificate of need. Agreement that the skilled nursing facility will not

participate in the Medicaid program shall be a condition of the

paragraph (n), and if such skilled nursing facility at any time

issuance of a certificate of need to any person under this

738	after the issuance of the certificate of need, regardless of the
739	ownership of the facility, participates in the Medicaid program or
740	admits or keeps any patients in the facility who are participating
741	in the Medicaid program, the State Department of Health shall
742	revoke the certificate of need, if it is still outstanding, and
743	shall deny or revoke the license of the skilled nursing facility,
744	at the time that the department determines, after a hearing
745	complying with due process, that the facility has failed to comply
746	with any of the conditions upon which the certificate of need was
747	issued, as provided in this paragraph and in the written agreement
748	by the recipient of the certificate of need. The total number of
749	nursing facility beds that may be authorized by any certificate of
750	need issued under this paragraph (n) shall not exceed sixty (60)
751	beds. If the certificate of need authorized under this paragraph
752	is not issued within twelve (12) months after July 1, 1998, the
753	department shall deny the application for the certificate of need
754	and shall not issue the certificate of need at any time after the
755	twelve-month period, unless the issuance is contested. If the
756	certificate of need is issued and substantial construction of the
757	nursing facility beds has not commenced within eighteen (18)
758	months after July 1, 1998, the State Department of Health, after a
759	hearing complying with due process, shall revoke the certificate
760	of need if it is still outstanding, and the department shall not
761	issue a license for the nursing facility at any time after the
762	eighteen-month period. However, if the issuance of the

certificate of need is contested, the department shall require
substantial construction of the nursing facility beds within six
for months after final adjudication on the issuance of the
certificate of need.

767 The department may issue a certificate of need for 768 the new construction, addition or conversion of skilled nursing 769 facility beds in Leake County, provided that the recipient of the 770 certificate of need agrees in writing that the skilled nursing 771 facility will not at any time participate in the Medicaid program 772 (Section 43-13-101 et seq.) or admit or keep any patients in the 773 skilled nursing facility who are participating in the Medicaid 774 This written agreement by the recipient of the 775 certificate of need shall be fully binding on any subsequent owner 776 of the skilled nursing facility, if the ownership of the facility 777 is transferred at any time after the issuance of the certificate 778 of need. Agreement that the skilled nursing facility will not 779 participate in the Medicaid program shall be a condition of the 780 issuance of a certificate of need to any person under this 781 paragraph (o), and if such skilled nursing facility at any time 782 after the issuance of the certificate of need, regardless of the 783 ownership of the facility, participates in the Medicaid program or 784 admits or keeps any patients in the facility who are participating 785 in the Medicaid program, the State Department of Health shall 786 revoke the certificate of need, if it is still outstanding, and 787 shall deny or revoke the license of the skilled nursing facility,

788 at the time that the department determines, after a hearing complying with due process, that the facility has failed to comply 789 790 with any of the conditions upon which the certificate of need was 791 issued, as provided in this paragraph and in the written agreement 792 by the recipient of the certificate of need. The total number of 793 nursing facility beds that may be authorized by any certificate of 794 need issued under this paragraph (o) shall not exceed sixty (60) 795 beds. If the certificate of need authorized under this paragraph 796 is not issued within twelve (12) months after July 1, 2001, the department shall deny the application for the certificate of need 797 798 and shall not issue the certificate of need at any time after the 799 twelve-month period, unless the issuance is contested. 800 certificate of need is issued and substantial construction of the 801 nursing facility beds has not commenced within eighteen (18) 802 months after July 1, 2001, the State Department of Health, after a 803 hearing complying with due process, shall revoke the certificate 804 of need if it is still outstanding, and the department shall not 805 issue a license for the nursing facility at any time after the 806 eighteen-month period. However, if the issuance of the 807 certificate of need is contested, the department shall require 808 substantial construction of the nursing facility beds within six 809 (6) months after final adjudication on the issuance of the 810 certificate of need.

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The department may issue a certificate of need for

the construction of a municipally owned nursing facility within

813	the Town of Belmont in Tishomingo County, not to exceed sixty (60)
814	beds, provided that the recipient of the certificate of need
815	agrees in writing that the skilled nursing facility will not at
816	any time participate in the Medicaid program (Section 43-13-101 et
817	seq.) or admit or keep any patients in the skilled nursing
818	facility who are participating in the Medicaid program. This
819	written agreement by the recipient of the certificate of need
820	shall be fully binding on any subsequent owner of the skilled
821	nursing facility, if the ownership of the facility is transferred
822	at any time after the issuance of the certificate of need.
823	Agreement that the skilled nursing facility will not participate
824	in the Medicaid program shall be a condition of the issuance of a
825	certificate of need to any person under this paragraph (p), and if
826	such skilled nursing facility at any time after the issuance of
827	the certificate of need, regardless of the ownership of the
828	facility, participates in the Medicaid program or admits or keeps
829	any patients in the facility who are participating in the Medicaid
830	program, the State Department of Health shall revoke the
831	certificate of need, if it is still outstanding, and shall deny or
832	revoke the license of the skilled nursing facility, at the time
833	that the department determines, after a hearing complying with due
834	process, that the facility has failed to comply with any of the
835	conditions upon which the certificate of need was issued, as
836	provided in this paragraph and in the written agreement by the
837	recipient of the certificate of need. The provision of Section

838 41-7-193(1) regarding substantial compliance of the projection of 839 need as reported in the current State Health Plan is waived for 840 the purposes of this paragraph. If the certificate of need authorized under this paragraph is not issued within twelve (12) 841 842 months after July 1, 1998, the department shall deny the 843 application for the certificate of need and shall not issue the 844 certificate of need at any time after the twelve-month period, 845 unless the issuance is contested. If the certificate of need is 846 issued and substantial construction of the nursing facility beds has not commenced within eighteen (18) months after July 1, 1998, 847 the State Department of Health, after a hearing complying with due 848 849 process, shall revoke the certificate of need if it is still 850 outstanding, and the department shall not issue a license for the 851 nursing facility at any time after the eighteen-month period. 852 However, if the issuance of the certificate of need is contested, 853 the department shall require substantial construction of the 854 nursing facility beds within six (6) months after final 855 adjudication on the issuance of the certificate of need. 856 Beginning on July 1, 1999, the State (q) (i) 857 Department of Health shall issue certificates of need during each 858 of the next four (4) fiscal years for the construction or 859 expansion of nursing facility beds or the conversion of other beds 860 to nursing facility beds in each county in the state having a need 861 for fifty (50) or more additional nursing facility beds, as shown 862 in the fiscal year 1999 State Health Plan, in the manner provided

in this paragraph (q). The total number of nursing facility beds that may be authorized by any certificate of need authorized under this paragraph (q) shall not exceed sixty (60) beds.

866 Subject to the provisions of subparagraph (ii) 867 (v), during each of the next four (4) fiscal years, the department 868 shall issue six (6) certificates of need for new nursing facility 869 beds, as follows: During fiscal years 2000, 2001 and 2002, one 870 (1) certificate of need shall be issued for new nursing facility 871 beds in the county in each of the four (4) Long-Term Care Planning Districts designated in the fiscal year 1999 State Health Plan 872 873 that has the highest need in the district for those beds; and two 874 (2) certificates of need shall be issued for new nursing facility 875 beds in the two (2) counties from the state at large that have the 876 highest need in the state for those beds, when considering the 877 need on a statewide basis and without regard to the Long-Term Care 878 Planning Districts in which the counties are located. During 879 fiscal year 2003, one (1) certificate of need shall be issued for 880 new nursing facility beds in any county having a need for fifty 881 (50) or more additional nursing facility beds, as shown in the fiscal year 1999 State Health Plan, that has not received a 882 883 certificate of need under this paragraph (q) during the three (3) previous fiscal years. During fiscal year 2000, in addition to 884 885 the six (6) certificates of need authorized in this subparagraph, 886 the department also shall issue a certificate of need for new

nursing facility beds in Amite County and a certificate of need for new nursing facility beds in Carroll County.

Subject to the provisions of subparagraph (iii) (v), the certificate of need issued under subparagraph (ii) for nursing facility beds in each Long-Term Care Planning District during each fiscal year shall first be available for nursing facility beds in the county in the district having the highest need for those beds, as shown in the fiscal year 1999 State Health If there are no applications for a certificate of need for nursing facility beds in the county having the highest need for those beds by the date specified by the department, then the certificate of need shall be available for nursing facility beds in other counties in the district in descending order of the need for those beds, from the county with the second highest need to the county with the lowest need, until an application is received for nursing facility beds in an eligible county in the district. Subject to the provisions of subparagraph (iv)

(iv) Subject to the provisions of subparagraph (v), the certificate of need issued under subparagraph (ii) for nursing facility beds in the two (2) counties from the state at large during each fiscal year shall first be available for nursing facility beds in the two (2) counties that have the highest need in the state for those beds, as shown in the fiscal year 1999 State Health Plan, when considering the need on a statewide basis and without regard to the Long-Term Care Planning Districts in which the counties are located. If there are no applications for

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912 a certificate of need for nursing facility beds in either of the 913 two (2) counties having the highest need for those beds on a statewide basis by the date specified by the department, then the 914 915 certificate of need shall be available for nursing facility beds 916 in other counties from the state at large in descending order of 917 the need for those beds on a statewide basis, from the county with 918 the second highest need to the county with the lowest need, until an application is received for nursing facility beds in an 919 920 eligible county from the state at large.

If a certificate of need is authorized to be (∇) issued under this paragraph (q) for nursing facility beds in a county on the basis of the need in the Long-Term Care Planning District during any fiscal year of the four-year period, a certificate of need shall not also be available under this paragraph (q) for additional nursing facility beds in that county on the basis of the need in the state at large, and that county shall be excluded in determining which counties have the highest need for nursing facility beds in the state at large for that fiscal year. After a certificate of need has been issued under this paragraph (q) for nursing facility beds in a county during any fiscal year of the four-year period, a certificate of need shall not be available again under this paragraph (q) for additional nursing facility beds in that county during the four-year period, and that county shall be excluded in determining

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936	which	counties	have	the	highest	need	for	nursing	facility	beds	in
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- 938 (vi) If more than one (1) application is made for a certificate of need for nursing home facility beds available 939 940 under this paragraph (q), in Yalobusha, Newton or Tallahatchie 941 County, and one (1) of the applicants is a county-owned hospital 942 located in the county where the nursing facility beds are available, the department shall give priority to the county-owned 943 944 hospital in granting the certificate of need if the following 945 conditions are met:
- 1. The county-owned hospital fully meets all applicable criteria and standards required to obtain a certificate of need for the nursing facility beds; and
- 2. The county-owned hospital's qualifications
 for the certificate of need, as shown in its application and as
 determined by the department, are at least equal to the
 qualifications of the other applicants for the certificate of
 need.
- 954 (r) (i) Beginning on July 1, 1999, the State
 955 Department of Health shall issue certificates of need during each
 956 of the next two (2) fiscal years for the construction or expansion
 957 of nursing facility beds or the conversion of other beds to
 958 nursing facility beds in each of the four (4) Long-Term Care
 959 Planning Districts designated in the fiscal year 1999 State Health

960 Plan, to provide care exclusively to patients with Alzheimer's 961 disease.

(ii) Not more than twenty (20) beds may be 963 authorized by any certificate of need issued under this paragraph 964 (r), and not more than a total of sixty (60) beds may be 965 authorized in any Long-Term Care Planning District by all 966 certificates of need issued under this paragraph (r). However, 967 the total number of beds that may be authorized by all 968 certificates of need issued under this paragraph (r) during any fiscal year shall not exceed one hundred twenty (120) beds, and 969 970 the total number of beds that may be authorized in any Long-Term 971 Care Planning District during any fiscal year shall not exceed 972 forty (40) beds. Of the certificates of need that are issued for 973 each Long-Term Care Planning District during the next two (2) 974 fiscal years, at least one (1) shall be issued for beds in the 975 northern part of the district, at least one (1) shall be issued 976 for beds in the central part of the district, and at least one (1) 977 shall be issued for beds in the southern part of the district.

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

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985	(s) The State Department of Health may issue a
986	certificate of need to a nonprofit skilled nursing facility using
987	the Green House model of skilled nursing care and located in Yazoo
988	City, Yazoo County, Mississippi, for the construction, expansion
989	or conversion of not more than nineteen (19) nursing facility
990	beds. For purposes of this paragraph (s), the provisions of
991	Section 41-7-193(1) requiring substantial compliance with the
992	projection of need as reported in the current State Health Plan
993	and the provisions of Section 41-7-197 requiring a formal
994	certificate of need hearing process are waived. There shall be no
995	prohibition or restrictions on participation in the Medicaid
996	program for the person receiving the certificate of need
997	authorized under this paragraph (s).

certificates of need to the owner of a nursing facility in operation at the time of Hurricane Katrina in Hancock County that was not operational on December 31, 2005, because of damage sustained from Hurricane Katrina to authorize the following: (i) the construction of a new nursing facility in Harrison County; (ii) the relocation of forty-nine (49) nursing facility beds from the Hancock County facility to the new Harrison County facility; (iii) the establishment of not more than twenty (20) non-Medicaid nursing facility beds at the Hancock County facility; and (iv) the establishment of not more than twenty (20) non-Medicaid beds at the new Harrison County facility. The certificates of need that

1010	authorize the non-Medicaid nursing facility beds under
1011	subparagraphs (iii) and (iv) of this paragraph (t) shall be
1012	subject to the following conditions: The owner of the Hancock
1013	County facility and the new Harrison County facility must agree in
1014	writing that no more than fifty (50) of the beds at the Hancock
1015	County facility and no more than forty-nine (49) of the beds at
1016	the Harrison County facility will be certified for participation
1017	in the Medicaid program, and that no claim will be submitted for
1018	Medicaid reimbursement for more than fifty (50) patients in the
1019	Hancock County facility in any month, or for more than forty-nine
1020	(49) patients in the Harrison County facility in any month, or for
1021	any patient in either facility who is in a bed that is not
1022	Medicaid-certified. This written agreement by the owner of the
1023	nursing facilities shall be a condition of the issuance of the
1024	certificates of need under this paragraph (t), and the agreement
1025	shall be fully binding on any later owner or owners of either
1026	facility if the ownership of either facility is transferred at any
1027	time after the certificates of need are issued. After this
1028	written agreement is executed, the Division of Medicaid and the
1029	State Department of Health shall not certify more than fifty (50)
1030	of the beds at the Hancock County facility or more than forty-nine
1031	(49) of the beds at the Harrison County facility for participation
1032	in the Medicaid program. If the Hancock County facility violates
1033	the terms of the written agreement by admitting or keeping in the
1034	facility on a regular or continuing basis more than fifty (50)

1035 patients who are participating in the Medicaid program, or if the 1036 Harrison County facility violates the terms of the written agreement by admitting or keeping in the facility on a regular or 1037 continuing basis more than forty-nine (49) patients who are 1038 1039 participating in the Medicaid program, the State Department of 1040 Health shall revoke the license of the facility that is in violation of the agreement, at the time that the department 1041 1042 determines, after a hearing complying with due process, that the 1043 facility has violated the agreement.

(u) The State Department of Health shall issue a certificate of need to a nonprofit venture for the establishment, construction and operation of a skilled nursing facility of not more than sixty (60) beds to provide skilled nursing care for ventilator dependent or otherwise medically dependent pediatric patients who require medical and nursing care or rehabilitation services to be located in a county in which an academic medical center and a children's hospital are located, and for any construction and for the acquisition of equipment related to those The facility shall be authorized to keep such ventilator beds. dependent or otherwise medically dependent pediatric patients beyond age twenty-one (21) in accordance with regulations of the State Board of Health. For purposes of this paragraph (u), the provisions of Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in the current State Health Plan are waived, and the provisions of Section 41-7-197

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1060 requiring a formal certificate of need hearing process are waived.

1061 The beds authorized by this paragraph shall be counted as

1062 pediatric skilled nursing facility beds for health planning

1063 purposes under Section 41-7-171 et seq. There shall be no

1064 prohibition of or restrictions on participation in the Medicaid

program for the person receiving the certificate of need

1066 authorized by this paragraph.

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1067 (3) The State Department of Health may grant approval for
1068 and issue certificates of need to any person proposing the new
1069 construction of, addition to, conversion of beds of or expansion
1070 of any health care facility defined in subparagraph (x)
1071 (psychiatric residential treatment facility) of Section

1072 41-7-173(h). The total number of beds which may be authorized by

1073 such certificates of need shall not exceed three hundred

1074 thirty-four (334) beds for the entire state.

(a) Of the total number of beds authorized under this subsection, the department shall issue a certificate of need to a privately owned psychiatric residential treatment facility in Simpson County for the conversion of sixteen (16) intermediate care facility for individuals with intellectual disabilities (ICF-IID) beds to psychiatric residential treatment facility beds, provided that facility agrees in writing that the facility shall give priority for the use of those sixteen (16) beds to Mississippi residents who are presently being treated in

out-of-state facilities.

1085	(b) Of the total number of beds authorized under this
1086	subsection, the department may issue a certificate or certificates
1087	of need for the construction or expansion of psychiatric
1088	residential treatment facility beds or the conversion of other
1089	beds to psychiatric residential treatment facility beds in Warren
1090	County, not to exceed sixty (60) psychiatric residential treatment
1091	facility beds, provided that the facility agrees in writing that
1092	no more than thirty (30) of the beds at the psychiatric
1093	residential treatment facility will be certified for participation
1094	in the Medicaid program (Section 43-13-101 et seq.) for the use of
1095	any patients other than those who are participating only in the
1096	Medicaid program of another state, and that no claim will be
1097	submitted to the Division of Medicaid for Medicaid reimbursement
1098	for more than thirty (30) patients in the psychiatric residential
1099	treatment facility in any day or for any patient in the
1100	psychiatric residential treatment facility who is in a bed that is
1101	not Medicaid-certified. This written agreement by the recipient
1102	of the certificate of need shall be a condition of the issuance of
1103	the certificate of need under this paragraph, and the agreement
1104	shall be fully binding on any subsequent owner of the psychiatric
1105	residential treatment facility if the ownership of the facility is
1106	transferred at any time after the issuance of the certificate of
1107	need. After this written agreement is executed, the Division of
1108	Medicaid and the State Department of Health shall not certify more
1109	than thirty (30) of the beds in the psychiatric residential

1110 treatment facility for participation in the Medicaid program for the use of any patients other than those who are participating 1111 1112 only in the Medicaid program of another state. If the psychiatric 1113 residential treatment facility violates the terms of the written 1114 agreement by admitting or keeping in the facility on a regular or 1115 continuing basis more than thirty (30) patients who are participating in the Mississippi Medicaid program, the State 1116 1117 Department of Health shall revoke the license of the facility, at 1118 the time that the department determines, after a hearing complying 1119 with due process, that the facility has violated the condition 1120 upon which the certificate of need was issued, as provided in this 1121 paragraph and in the written agreement.

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

(c) Of the total number of beds authorized under this subsection, the department shall issue a certificate of need to a hospital currently operating Medicaid-certified acute psychiatric beds for adolescents in DeSoto County, for the establishment of a forty-bed psychiatric residential treatment facility in DeSoto County, provided that the hospital agrees in writing (i) that the hospital shall give priority for the use of those forty (40) beds to Mississippi residents who are presently being treated in out-of-state facilities, and (ii) that no more than fifteen (15)

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1135	of the beds at the psychiatric residential treatment facility will
1136	be certified for participation in the Medicaid program (Section
1137	43-13-101 et seq.), and that no claim will be submitted for
1138	Medicaid reimbursement for more than fifteen (15) patients in the
1139	psychiatric residential treatment facility in any day or for any
1140	patient in the psychiatric residential treatment facility who is
1141	in a bed that is not Medicaid-certified. This written agreement
1142	by the recipient of the certificate of need shall be a condition
1143	of the issuance of the certificate of need under this paragraph,
1144	and the agreement shall be fully binding on any subsequent owner
1145	of the psychiatric residential treatment facility if the ownership
1146	of the facility is transferred at any time after the issuance of
1147	the certificate of need. After this written agreement is
1148	executed, the Division of Medicaid and the State Department of
1149	Health shall not certify more than fifteen (15) of the beds in the
1150	psychiatric residential treatment facility for participation in
1151	the Medicaid program. If the psychiatric residential treatment
1152	facility violates the terms of the written agreement by admitting
1153	or keeping in the facility on a regular or continuing basis more
1154	than fifteen (15) patients who are participating in the Medicaid
1155	program, the State Department of Health shall revoke the license
1156	of the facility, at the time that the department determines, after
1157	a hearing complying with due process, that the facility has
1158	violated the condition upon which the certificate of need was

1159	issued,	as	provided	in	this	paragraph	and	in	the	written
1160	agreemer	nt.								

- Of the total number of beds authorized under this 1161 1162 subsection, the department may issue a certificate or certificates 1163 of need for the construction or expansion of psychiatric 1164 residential treatment facility beds or the conversion of other beds to psychiatric treatment facility beds, not to exceed thirty 1165 1166 (30) psychiatric residential treatment facility beds, in either 1167 Alcorn, Tishomingo, Prentiss, Lee, Itawamba, Monroe, Chickasaw, 1168 Pontotoc, Calhoun, Lafayette, Union, Benton or Tippah County. 1169 Of the total number of beds authorized under this (e) subsection (3) the department shall issue a certificate of need to 1170 1171 a privately owned, nonprofit psychiatric residential treatment facility in Hinds County for an eight-bed expansion of the 1172 1173 facility, provided that the facility agrees in writing that the 1174 facility shall give priority for the use of those eight (8) beds
- (f) The department shall issue a certificate of need to a one-hundred-thirty-four-bed specialty hospital located on twenty-nine and forty-four one-hundredths (29.44) commercial acres at 5900 Highway 39 North in Meridian (Lauderdale County), Mississippi, for the addition, construction or expansion of child/adolescent psychiatric residential treatment facility beds in Lauderdale County. As a condition of issuance of the

to Mississippi residents who are presently being treated in

out-of-state facilities.

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1184 certificate of need under this paragraph, the facility shall give 1185 priority in admissions to the child/adolescent psychiatric residential treatment facility beds authorized under this 1186 paragraph to patients who otherwise would require out-of-state 1187 1188 placement. The Division of Medicaid, in conjunction with the 1189 Department of Human Services, shall furnish the facility a list of 1190 all out-of-state patients on a quarterly basis. Furthermore, 1191 notice shall also be provided to the parent, custodial parent or 1192 guardian of each out-of-state patient notifying them of the 1193 priority status granted by this paragraph. For purposes of this 1194 paragraph, the provisions of Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in 1195 the current State Health Plan are waived. The total number of 1196 child/adolescent psychiatric residential treatment facility beds 1197 1198 that may be authorized under the authority of this paragraph shall 1199 be sixty (60) beds. There shall be no prohibition or restrictions 1200 on participation in the Medicaid program (Section 43-13-101 et seq.) for the person receiving the certificate of need authorized 1201 1202 under this paragraph or for the beds converted pursuant to the 1203 authority of that certificate of need.

(4) (a) From and after March 25, 2021, the department may issue a certificate of need to any person for the new construction of any hospital, psychiatric hospital or chemical dependency hospital that will contain any child/adolescent psychiatric or child/adolescent chemical dependency beds, or for the conversion

1209 of any other health care facility to a hospital, psychiatric 1210 hospital or chemical dependency hospital that will contain any child/adolescent psychiatric or child/adolescent chemical 1211 dependency beds. There shall be no prohibition or restrictions on 1212 1213 participation in the Medicaid program (Section 43-13-101 et seq.) 1214 for the person(s) receiving the certificate(s) of need authorized under this paragraph (a) or for the beds converted pursuant to the 1215 1216 authority of that certificate of need. In issuing any new 1217 certificate of need for any child/adolescent psychiatric or 1218 child/adolescent chemical dependency beds, either by new 1219 construction or conversion of beds of another category, the 1220 department shall give preference to beds which will be located in 1221 an area of the state which does not have such beds located in it, 1222 and to a location more than sixty-five (65) miles from existing 1223 beds. Upon receiving 2020 census data, the department may amend 1224 the State Health Plan regarding child/adolescent psychiatric and 1225 child/adolescent chemical dependency beds to reflect the need 1226 based on new census data.

1227 (i) [Deleted]

(ii) The department may issue a certificate of need for the conversion of existing beds in a county hospital in Choctaw County from acute care beds to child/adolescent chemical dependency beds. For purposes of this subparagraph (ii), the provisions of Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in the current State

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L234	Health Plan are waived. The total number of beds that may be
L235	authorized under authority of this subparagraph shall not exceed
L236	twenty (20) beds. There shall be no prohibition or restrictions
L237	on participation in the Medicaid program (Section 43-13-101 et
L238	seq.) for the hospital receiving the certificate of need
L239	authorized under this subparagraph or for the beds converted
L240	pursuant to the authority of that certificate of need.
L241	(iii) The department may issue a certificate or
L242	certificates of need for the construction or expansion of
L243	child/adolescent psychiatric beds or the conversion of other beds
L244	to child/adolescent psychiatric beds in Warren County. For
L245	purposes of this subparagraph (iii), the provisions of Section
L246	41-7-193(1) requiring substantial compliance with the projection
L247	of need as reported in the current State Health Plan are waived.
L248	The total number of beds that may be authorized under the
L249	authority of this subparagraph shall not exceed twenty (20) beds.
L250	There shall be no prohibition or restrictions on participation in
L251	the Medicaid program (Section 43-13-101 et seq.) for the person
L252	receiving the certificate of need authorized under this
L253	subparagraph or for the beds converted pursuant to the authority
L254	of that certificate of need.
L255	If by January 1, 2002, there has been no significant
L256	commencement of construction of the beds authorized under this
L257	subparagraph (iii), or no significant action taken to convert
L258	existing beds to the beds authorized under this subparagraph, then

1259 the certificate of need that was previously issued under this 1260 subparagraph shall expire. If the previously issued certificate of need expires, the department may accept applications for 1261 1262 issuance of another certificate of need for the beds authorized 1263 under this subparagraph, and may issue a certificate of need to 1264 authorize the construction, expansion or conversion of the beds 1265 authorized under this subparagraph.

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H. B. No. 25/HR26/R1199 PAGE 52 (RF\KW)

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

1281 The department may issue a certificate of need 1282 to any county hospital located in Leflore County for the construction or expansion of adult psychiatric beds or the 1283

1284	conversion of other beds to adult psychiatric beds, not to exceed
1285	twenty (20) beds, provided that the recipient of the certificate
1286	of need agrees in writing that the adult psychiatric beds will not
1287	at any time be certified for participation in the Medicaid program
1288	and that the hospital will not admit or keep any patients who are
1289	participating in the Medicaid program in any of such adult
1290	psychiatric beds. This written agreement by the recipient of the
1291	certificate of need shall be fully binding on any subsequent owner
1292	of the hospital if the ownership of the hospital is transferred at
1293	any time after the issuance of the certificate of need. Agreement
1294	that the adult psychiatric beds will not be certified for
1295	participation in the Medicaid program shall be a condition of the
1296	issuance of a certificate of need to any person under this
1297	subparagraph (v), and if such hospital at any time after the
1298	issuance of the certificate of need, regardless of the ownership
1299	of the hospital, has any of such adult psychiatric beds certified
1300	for participation in the Medicaid program or admits or keeps any
1301	Medicaid patients in such adult psychiatric beds, the State
1302	Department of Health shall revoke the certificate of need, if it
1303	is still outstanding, and shall deny or revoke the license of the
1304	hospital at the time that the department determines, after a
1305	hearing complying with due process, that the hospital has failed
1306	to comply with any of the conditions upon which the certificate of
1307	need was issued, as provided in this subparagraph and in the
1308	written agreement by the recipient of the certificate of need.

1310	certificates of need for the expansion of child psychiatric beds
1311	or the conversion of other beds to child psychiatric beds at the
1312	University of Mississippi Medical Center. For purposes of this
1313	subparagraph (vi), the provisions of Section 41-7-193(1) requiring
1314	substantial compliance with the projection of need as reported in
1315	the current State Health Plan are waived. The total number of
1316	beds that may be authorized under the authority of this
1317	subparagraph shall not exceed fifteen (15) beds. There shall be
1318	no prohibition or restrictions on participation in the Medicaid
1319	program (Section 43-13-101 et seq.) for the hospital receiving the
1320	certificate of need authorized under this subparagraph or for the
1321	beds converted pursuant to the authority of that certificate of
1322	need.

The department may issue a certificate or

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- (b) From and after July 1, 1990, no hospital, 1323 1324 psychiatric hospital or chemical dependency hospital shall be 1325 authorized to add any child/adolescent psychiatric or 1326 child/adolescent chemical dependency beds or convert any beds of 1327 another category to child/adolescent psychiatric or 1328 child/adolescent chemical dependency beds without a certificate of 1329 need under the authority of subsection (1)(c) and subsection 1330 (4)(a) of this section.
- 1331 (5) The department may issue a certificate of need to a
 1332 county hospital in Winston County for the conversion of fifteen
 1333 (15) acute care beds to geriatric psychiatric care beds.

1334	(6) The State Department of Health shall issue a certificate
1335	of need to a Mississippi corporation qualified to manage a
1336	long-term care hospital as defined in Section 41-7-173(h)(xii) in
1337	Harrison County, not to exceed eighty (80) beds, including any
1338	necessary renovation or construction required for licensure and
1339	certification, provided that the recipient of the certificate of
1340	need agrees in writing that the long-term care hospital will not
1341	at any time participate in the Medicaid program (Section 43-13-101
1342	et seq.) or admit or keep any patients in the long-term care
1343	hospital who are participating in the Medicaid program. This
1344	written agreement by the recipient of the certificate of need
1345	shall be fully binding on any subsequent owner of the long-term
1346	care hospital, if the ownership of the facility is transferred at
1347	any time after the issuance of the certificate of need. Agreement
1348	that the long-term care hospital will not participate in the
1349	Medicaid program shall be a condition of the issuance of a
1350	certificate of need to any person under this subsection (6), and
1351	if such long-term care hospital at any time after the issuance of
1352	the certificate of need, regardless of the ownership of the
1353	facility, participates in the Medicaid program or admits or keeps
1354	any patients in the facility who are participating in the Medicaid
1355	program, the State Department of Health shall revoke the
1356	certificate of need, if it is still outstanding, and shall deny or
1357	revoke the license of the long-term care hospital, at the time
1358	that the department determines, after a hearing complying with due

process, that the facility has failed to comply with any of the conditions upon which the certificate of need was issued, as provided in this subsection and in the written agreement by the recipient of the certificate of need. For purposes of this subsection, the provisions of Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in the current State Health Plan are waived.

1366 The State Department of Health may issue a certificate 1367 of need to any hospital in the state to utilize a portion of its beds for the "swing-bed" concept. Any such hospital must be in 1368 1369 conformance with the federal regulations regarding such swing-bed concept at the time it submits its application for a certificate 1370 1371 of need to the State Department of Health, except that such hospital may have more licensed beds or a higher average daily 1372 1373 census (ADC) than the maximum number specified in federal 1374 regulations for participation in the swing-bed program. Any 1375 hospital meeting all federal requirements for participation in the 1376 swing-bed program which receives such certificate of need shall 1377 render services provided under the swing-bed concept to any 1378 patient eligible for Medicare (Title XVIII of the Social Security 1379 Act) who is certified by a physician to be in need of such 1380 services, and no such hospital shall permit any patient who is 1381 eligible for both Medicaid and Medicare or eligible only for 1382 Medicaid to stay in the swing beds of the hospital for more than 1383 thirty (30) days per admission unless the hospital receives prior

1384 approval for such patient from the Division of Medicaid, Office of 1385 the Governor. Any hospital having more licensed beds or a higher 1386 average daily census (ADC) than the maximum number specified in federal regulations for participation in the swing-bed program 1387 1388 which receives such certificate of need shall develop a procedure 1389 to ensure that before a patient is allowed to stay in the swing beds of the hospital, there are no vacant nursing home beds 1390 1391 available for that patient located within a fifty-mile radius of 1392 the hospital. When any such hospital has a patient staying in the 1393 swing beds of the hospital and the hospital receives notice from a 1394 nursing home located within such radius that there is a vacant bed 1395 available for that patient, the hospital shall transfer the 1396 patient to the nursing home within a reasonable time after receipt 1397 of the notice. Any hospital which is subject to the requirements 1398 of the two (2) preceding sentences of this subsection may be 1399 suspended from participation in the swing-bed program for a 1400 reasonable period of time by the State Department of Health if the department, after a hearing complying with due process, determines 1401 1402 that the hospital has failed to comply with any of those 1403 requirements.

1404 (8) * * * [Deleted]

1405 (9) The Department of Health shall not grant approval for or
1406 issue a certificate of need to any person proposing the
1407 establishment of, or expansion of the currently approved territory
1408 of, or the contracting to establish a home office, subunit or

branch office within the space operated as a health care facility as defined in Section 41-7-173(h)(i) through (viii) by a health care facility as defined in subparagraph (ix) of Section 41-7-173(h).

1413 (10) Health care facilities owned and/or operated by the 1414 state or its agencies are exempt from the restraints in this section against issuance of a certificate of need if such addition 1415 1416 or expansion consists of repairing or renovation necessary to 1417 comply with the state licensure law. This exception shall not 1418 apply to the new construction of any building by such state 1419 facility. This exception shall not apply to any health care 1420 facilities owned and/or operated by counties, municipalities, 1421 districts, unincorporated areas, other defined persons, or any 1422 combination thereof.

(11) The new construction, renovation or expansion of or addition to any health care facility defined in subparagraph (ii) (psychiatric hospital), subparagraph (iv) (skilled nursing facility), subparagraph (vi) (intermediate care facility) * * * and subparagraph (x) (psychiatric residential treatment facility) of Section 41-7-173(h) which is owned by the State of Mississippi and under the direction and control of the State Department of Mental Health, and the addition of new beds or the conversion of beds from one category to another in any such defined health care facility which is owned by the State of Mississippi and under the direction and control of the State Department of Mental Health,

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1434 shall not require the issuance of a certificate of need under

1435 Section 41-7-171 et seq., notwithstanding any provision in Section

1436 41-7-171 et seq. to the contrary.

1437 (12) The new construction, renovation or expansion of or

1438 addition to any veterans homes or domiciliaries for eligible

veterans of the State of Mississippi as authorized under Section

1440 35-1-19 shall not require the issuance of a certificate of need,

1441 notwithstanding any provision in Section 41-7-171 et seq. to the

1442 contrary.

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1443 (13) The repair or the rebuilding of an existing, operating

health care facility that sustained significant damage from a

1445 natural disaster that occurred after April 15, 2014, in an area

1446 that is proclaimed a disaster area or subject to a state of

1447 emergency by the Governor or by the President of the United States

1448 shall be exempt from all of the requirements of the Mississippi

1449 Certificate of Need Law (Section 41-7-171 et seq.) and any and all

1450 rules and regulations promulgated under that law, subject to the

1451 following conditions:

1452 (a) The repair or the rebuilding of any such damaged

1453 health care facility must be within one (1) mile of the

1454 pre-disaster location of the campus of the damaged health care

1455 facility, except that any temporary post-disaster health care

1456 facility operating location may be within five (5) miles of the

1457 pre-disaster location of the damaged health care facility;

1458	(b) The repair or the rebuilding of the damaged health
1459	care facility (i) does not increase or change the complement of
1460	its bed capacity that it had before the Governor's or the
1461	President's proclamation, (ii) does not increase or change its
1462	levels and types of health care services that it provided before
1463	the Governor's or the President's proclamation, and (iii) does not
1464	rebuild in a different county; however, this paragraph does not
1465	restrict or prevent a health care facility from decreasing its bed
1466	capacity that it had before the Governor's or the President's
1467	proclamation, or from decreasing the levels of or decreasing or
1468	eliminating the types of health care services that it provided
1469	before the Governor's or the President's proclamation, when the
1470	damaged health care facility is repaired or rebuilt;

- (c) The exemption from Certificate of Need Law provided under this subsection (13) is valid for only five (5) years from the date of the Governor's or the President's proclamation. If actual construction has not begun within that five-year period, the exemption provided under this subsection is inapplicable; and
- (d) The Division of Health Facilities Licensure and
 Certification of the State Department of Health shall provide the
 same oversight for the repair or the rebuilding of the damaged
 health care facility that it provides to all health care facility
 construction projects in the state.
- 1481 For the purposes of this subsection (13), "significant damage" to a health care facility means damage to the health care

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facility requiring an expenditure of at least One Million Dollars (\$1,000,000.00).

- 1485 The State Department of Health shall issue a certificate of need to any hospital which is currently licensed 1486 1487 for two hundred fifty (250) or more acute care beds and is located 1488 in any general hospital service area not having a comprehensive 1489 cancer center, for the establishment and equipping of such a 1490 center which provides facilities and services for outpatient 1491 radiation oncology therapy, outpatient medical oncology therapy, 1492 and appropriate support services including the provision of 1493 radiation therapy services. The provisions of Section 41-7-193(1) 1494 regarding substantial compliance with the projection of need as 1495 reported in the current State Health Plan are waived for the 1496 purpose of this subsection.
- 1497 (15) The State Department of Health may authorize the
 1498 transfer of hospital beds, not to exceed sixty (60) beds, from the
 1499 North Panola Community Hospital to the South Panola Community
 1500 Hospital. The authorization for the transfer of those beds shall
 1501 be exempt from the certificate of need review process.
- (16) The State Department of Health shall issue any
 certificates of need necessary for Mississippi State University
 and a public or private health care provider to jointly acquire
 and operate a linear accelerator and a magnetic resonance imaging
 unit. Those certificates of need shall cover all capital
 expenditures related to the project between Mississippi State

1508	University and the health care provider, including, but not
1509	limited to, the acquisition of the linear accelerator, the
1510	magnetic resonance imaging unit and other radiological modalities;
1511	the offering of linear accelerator and magnetic resonance imaging
1512	services; and the cost of construction of facilities in which to
1513	locate these services. The linear accelerator and the magnetic
1514	resonance imaging unit shall be (a) located in the City of
1515	Starkville, Oktibbeha County, Mississippi; (b) operated jointly by
1516	Mississippi State University and the public or private health care
1517	provider selected by Mississippi State University through a
1518	request for proposals (RFP) process in which Mississippi State
1519	University selects, and the Board of Trustees of State
1520	Institutions of Higher Learning approves, the health care provider
1521	that makes the best overall proposal; (c) available to Mississippi
1522	State University for research purposes two-thirds (2/3) of the
1523	time that the linear accelerator and magnetic resonance imaging
1524	unit are operational; and (d) available to the public or private
1525	health care provider selected by Mississippi State University and
1526	approved by the Board of Trustees of State Institutions of Higher
1527	Learning one-third $(1/3)$ of the time for clinical, diagnostic and
1528	treatment purposes. For purposes of this subsection, the
1529	provisions of Section 41-7-193(1) requiring substantial compliance
1530	with the projection of need as reported in the current State
1531	Health Plan are waived.

1532	(17) The State Department of Health shall issue a
1533	certificate of need for the construction of an acute care hospital
1534	in Kemper County, not to exceed twenty-five (25) beds, which shall
1535	be named the "John C. Stennis Memorial Hospital." In issuing the
1536	certificate of need under this subsection, the department shall
1537	give priority to a hospital located in Lauderdale County that has
1538	two hundred fifteen (215) beds. For purposes of this subsection,
1539	the provisions of Section 41-7-193(1) requiring substantial
1540	compliance with the projection of need as reported in the current
1541	State Health Plan and the provisions of Section 41-7-197 requiring
1542	a formal certificate of need hearing process are waived. There
1543	shall be no prohibition or restrictions on participation in the
1544	Medicaid program (Section 43-13-101 et seq.) for the person or
1545	entity receiving the certificate of need authorized under this
1546	subsection or for the beds constructed under the authority of that
1547	certificate of need.

(18)The planning, design, construction, renovation, addition, furnishing and equipping of a clinical research unit at any health care facility defined in Section 41-7-173(h) that is under the direction and control of the University of Mississippi Medical Center and located in Jackson, Mississippi, and the addition of new beds or the conversion of beds from one (1) category to another in any such clinical research unit, shall not require the issuance of a certificate of need under Section

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- 1556 41-7-171 et seq., notwithstanding any provision in Section
- 1557 41-7-171 et seq. to the contrary.
- 1558 (19) [Repealed]
- 1559 (20) Nothing in this section or in any other provision of
- 1560 Section 41-7-171 et seq. shall prevent any nursing facility from
- 1561 designating an appropriate number of existing beds in the facility
- 1562 as beds for providing care exclusively to patients with
- 1563 Alzheimer's disease.
- 1564 (21) Nothing in this section or any other provision of
- 1565 Section 41-7-171 et seq. shall prevent any health care facility
- 1566 from the new construction, renovation, conversion or expansion of
- 1567 new beds in the facility designated as intensive care units,
- 1568 negative pressure rooms, or isolation rooms pursuant to the
- 1569 provisions of Sections 41-14-1 through 41-14-11, or Section
- 1570 41-14-31. For purposes of this subsection, the provisions of
- 1571 Section 41-7-193(1) requiring substantial compliance with the
- 1572 projection of need as reported in the current State Health Plan
- 1573 and the provisions of Section 41-7-197 requiring a formal
- 1574 certificate of need hearing process are waived.
- 1575 **SECTION 3.** This act shall take effect and be in force from
- 1576 and after July 1, 2025.