By: Representative Yancey

To: Public Health and Human Services

HOUSE BILL NO. 323

AN ACT TO AMEND SECTIONS 41-7-173 AND 41-7-191, MISSISSIPPI CODE OF 1972, TO REMOVE CHEMICAL DEPENDENCY SERVICES AND FACILITIES FROM THE REQUIREMENTS OF THE HEALTH CARE CERTIFICATE OF

4 NEED LAW; AND FOR RELATED PURPOSES.

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

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

7 amended as follows:

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

9 following words shall have the meanings ascribed herein, unless

10 the context otherwise requires:

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

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

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

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

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

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

of the application under review, formally indicated an intention

18 to provide service similar to that of the proposal being

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
- 46 Dollars (\$10,000,000.00), adjusted for inflation as published by
- 47 the State 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 a	ind all	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, * * * skilled nursing facilities, end-stage
- 118 renal disease (ESRD) facilities, including freestanding

119	hemodialysis units, intermediate care facilities, ambulatory
120	surgical facilities, intermediate care facilities for the mentally
121	retarded, home health agencies, psychiatric residential treatment
122	facilities, pediatric skilled nursing facilities, long-term care
123	hospitals, comprehensive medical rehabilitation facilities,
124	including 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:

- (i) "Hospital" means an institution which is
 primarily engaged in providing to inpatients, by or under the
 supervision of physicians, diagnostic services and therapeutic
 services for medical diagnosis, treatment and care of injured,
 disabled or sick persons, or rehabilitation services for the
 rehabilitation of injured, disabled or sick persons. Such term
 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
144	diagnosis and treatment of persons with mental illness.
145	(iii) * * * [Deleted]
146	(iv) "Skilled nursing facility" means an
147	institution or a distinct part of an institution which is
148	primarily engaged in providing to inpatients skilled nursing care
149	and related services for patients who require medical or nursing
150	care or rehabilitation services for the rehabilitation of injured,
151	disabled or sick persons.
152	(v) "End-stage renal disease (ESRD) facilities"
153	means kidney disease treatment centers, which includes
154	freestanding hemodialysis units and limited care facilities. The
155	term "limited care facility" generally refers to an
156	off-hospital-premises facility, regardless of whether it is
157	provider or nonprovider operated, which is engaged primarily in
158	furnishing maintenance hemodialysis services to stabilized
159	patients.
160	(vi) "Intermediate care facility" means an
161	institution which provides, on a regular basis, health-related
162	care and services to individuals who do not require the degree of
163	care and treatment which a hospital or skilled nursing facility is
164	designed to provide, but who, because of their mental or physical

condition, require health-related care and services (above the

level of room and board).

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167	(vii) "Ambulatory surgical facility" means a
168	facility primarily organized or established for the purpose of
169	performing surgery for outpatients and is a separate identifiable
170	legal entity from any other health care facility. Such term does
171	not include the offices of private physicians or dentists, whether
172	for individual or group practice, and does not include any
173	abortion facility as defined in Section 41-75-1(f).
174	(viii) "Intermediate care facility for the
175	mentally retarded" means an intermediate care facility that
176	provides health or rehabilitative services in a planned program of
177	activities to persons with an intellectual disability, also
178	including, but not limited to, cerebral palsy and other conditions
179	covered by the Federal Developmentally Disabled Assistance and
180	Bill of Rights Act, Public Law 94-103.
181	(ix) "Home health agency" means a public or
182	privately owned agency or organization, or a subdivision of such
183	an agency or organization, properly authorized to conduct business
184	in Mississippi, which is primarily engaged in providing to
185	individuals at the written direction of a licensed physician, in
186	the individual's place of residence, skilled nursing services
187	provided by or under the supervision of a registered nurse
188	licensed to practice in Mississippi, and one or more of the
189	following services or items:
190	1. Physical, occupational or speech therapy;
191	2. Medical social services;

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

217 facility by a court, local school district or by the Departme

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

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

who require medical or nursing care or rehabilitation services for

individuals with physical disabilities;

1. Includes evaluation and treatment of

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266	2. Emphasizes education and training of
267	individuals with disabilities;
268	3. Incorporates at least the following core
269	disciplines:
270	* * * <u>a.</u> Physical Therapy;
271	* * * <u>b.</u> Occupational Therapy;
272	* * * <u>c.</u> Speech and Language Therapy;
273	* * * <u>d.</u> Rehabilitation Nursing; and
274	4. Incorporates at least three (3) of the
275	following disciplines:
276	* * * <u>a.</u> Psychology;
277	* * * <u>b.</u> Audiology;
278	* * * <u>c.</u> Respiratory Therapy;
279	* * * <u>d.</u> Therapeutic Recreation;
280	* * * <u>e.</u> Orthotics;
281	* * * <u>f.</u> Prosthetics;
282	* * *g. Special Education;
283	* * * <u>h.</u> Vocational Rehabilitation;
284	* * * <u>i.</u> Psychotherapy;
285	* * * <u>j.</u> Social Work;
286	* * * <u>k.</u> Rehabilitation Engineering.
287	These specialized programs include, but are not limited to:
288	spinal cord injury programs, head injury programs and infant and
289	early childhood development programs.

290	(i) "Health maintenance organization" or "HMO" means	а
291	public or private organization organized under the laws of this	
292	state or the federal government which:	

- (i) Provides or otherwise makes available to
 294 enrolled participants health care services, including
 295 substantially the following basic health care services: usual
 296 physician services, hospitalization, laboratory, x-ray, emergency
 297 and preventive services, and out-of-area coverage;
- (ii) Is compensated (except for copayments) for
 the provision of the basic health care services listed in
 subparagraph (i) of this paragraph to enrolled participants on a
 predetermined basis; and
- 302 (iii) Provides physician services primarily:
- 303 1. Directly through physicians who are either 304 employees or partners of such organization; or
- 2. Through arrangements with individual physicians or one or more groups of physicians (organized on a group practice or individual practice basis).
- (j) "Health service area" means a geographic area of
 the state designated in the State Health Plan as the area to be
 used in planning for specified health facilities and services and
 to be used when considering certificate of need applications to
 provide health facilities and services.
- 313 (k) "Health services" means clinically related (i.e., 314 diagnostic, treatment or rehabilitative) services and includes

315	* * * mental health and home health care services. "Clinical
316	health services" shall only include those activities which
317	contemplate any change in the existing bed complement of any
318	health care facility through the addition or conversion of any
319	beds, under Section 41-7-191(1)(c) or propose to offer any health
320	services if those services have not been provided on a regular
321	basis by the proposed provider of such services within the period
322	of twelve (12) months prior to the time such services would be
323	offered, under Section 41-7-191(1)(d). "Nonclinical health
324	services" shall be all other services which do not involve any
325	change in the existing bed complement or offering health services
326	as described above. "Health services" does not include medical
327	and related services for the diagnosis and treatment of chemical
328	dependency such as alcohol and drug abuse.

- 329 (1) "Institutional health services" shall mean health 330 services provided in or through health care facilities and shall 331 include the entities in or through which such services are 332 provided.
- (m) "Major medical equipment" means medical equipment
 designed for providing medical or any health-related service which
 costs in excess of One Million Five Hundred Thousand Dollars
 (\$1,500,000.00). However, this definition shall not be applicable
 to clinical laboratories if they are determined by the State

 Department of Health to be independent of any physician's office,
 hospital or other health care facility or otherwise not so defined

340	by federal	or	state	law,	or	rules	and	regulations	promulgated
341	thereunder								

- 342 (n) "State Department of Health" or "department" shall
 343 mean the state agency created under Section 41-3-15, which shall
 344 be considered to be the State Health Planning and Development
 345 Agency, as defined in paragraph (u) of this section.
- 346 (o) "Offer," when used in connection with health
 347 services, means that it has been determined by the State
 348 Department of Health that the health care facility is capable of
 349 providing specified health services.
- 350 (p) "Person" means an individual, a trust or estate, 351 partnership, corporation (including associations, joint-stock 352 companies and insurance companies), the state or a political 353 subdivision or instrumentality of the state.
- 354 (q) "Provider" shall mean any person who is a provider 355 or representative of a provider of health care services requiring 356 a certificate of need under Section 41-7-171 et seq., or who has 357 any financial or indirect interest in any provider of services.
- (r) "Radiation therapy services" means the treatment of cancer and other diseases using ionizing radiation of either high energy photons (x-rays or gamma rays) or charged particles (electrons, protons or heavy nuclei). However, for purposes of a certificate of need, radiation therapy services shall not include low energy, superficial, external beam x-ray treatment of superficial skin lesions.

365		(s)	"Se	creta	ary"	mear	s the	Sec	retar	ry of	Heal	th a	and	Humaı	1
366	Services,	and	any	offi	cer (or en	nploye	e of	the	Depa	rtmen	it o	f H∈	ealth	
367	and Human	Serv	rices	to t	whom	the	autho	rity	invo	olved	has	beei	n		
368	delegated.														

- 369 (t) "State Health Plan" means the sole and official 370 statewide health plan for Mississippi which identifies priority 371 state health needs and establishes standards and criteria for 372 health-related activities which require certificate of need review 373 in compliance with Section 41-7-191.
- 374 (u) "State Health Planning and Development Agency"
 375 means the agency of state government designated to perform health
 376 planning and resource development programs for the State of
 377 Mississippi.
- 378 **SECTION 2.** Section 41-7-191, Mississippi Code of 1972, is amended as follows:
- 380 41-7-191. (1) No person shall engage in any of the 381 following activities without obtaining the required certificate of 382 need:
- 383 (a) The construction, development or other
 384 establishment of a new health care facility, which establishment
 385 shall include the reopening of a health care facility that has
 386 ceased to operate for a period of sixty (60) months or more;
- 387 (b) The relocation of a health care facility or portion 388 thereof, or major medical equipment, unless such relocation of a 389 health care facility or portion thereof, or major medical

390	equipment, which does not involve a capital expenditure by or on
391	behalf of a health care facility, is within five thousand two
392	hundred eighty (5,280) feet from the main entrance of the health
393	care facility;

Any change in the existing bed complement of any health care facility through the addition or conversion of any beds or the alteration, modernizing or refurbishing of any unit or department in which the beds may be located; however, if a health care facility has voluntarily delicensed some of its existing bed complement, it may later relicense some or all of its delicensed beds without the necessity of having to acquire a certificate of The State Department of Health shall maintain a record of the delicensing health care facility and its voluntarily delicensed beds and continue counting those beds as part of the state's total bed count for health care planning purposes. If a health care facility that has voluntarily delicensed some of its beds later desires to relicense some or all of its voluntarily delicensed beds, it shall notify the State Department of Health of its intent to increase the number of its licensed beds. The State Department of Health shall survey the health care facility within thirty (30) days of that notice and, if appropriate, issue the health care facility a new license reflecting the new contingent of beds. However, in no event may a health care facility that has voluntarily delicensed some of its beds be reissued a license to operate beds in excess of its bed count before the voluntary

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415	delicensure of some of its beds without seeking certificate of
416	need approval;
417	(d) Offering of the following health services if those
418	services have not been provided on a regular basis by the proposed
419	provider of such services within the period of twelve (12) months
420	prior to the time such services would be offered:
421	(i) Open-heart surgery services;
422	(ii) Cardiac catheterization services;
423	(iii) Comprehensive inpatient rehabilitation
424	services;
425	(iv) Licensed psychiatric services;
426	(v) * * * ; [Deleted]
427	(vi) Radiation therapy services;
428	(vii) Diagnostic imaging services of an invasive
429	nature, i.e. invasive digital angiography;
430	(viii) Nursing home care as defined in
431	subparagraphs (iv), (vi) and (viii) of Section 41-7-173(h);
432	(ix) Home health services;
433	(x) Swing-bed services;
434	(xi) Ambulatory surgical services;
435	(xii) Magnetic resonance imaging services;
436	(xiii) [Deleted]
437	(xiv) Long-term care hospital services;
438	(xv) Positron emission tomography (PET) services;

440	one physical facility or site to another physical facility or
441	site, unless such relocation, which does not involve a capital
442	expenditure by or on behalf of a health care facility, (i) is to a
443	physical facility or site within five thousand two hundred eighty
444	(5,280) feet from the main entrance of the health care facility
445	where the health care service is located, or (ii) is the result of
446	an order of a court of appropriate jurisdiction or a result of
447	pending litigation in such court, or by order of the State
448	Department of Health, or by order of any other agency or legal
449	entity of the state, the federal government, or any political
450	subdivision of either, whose order is also approved by the State
451	Department of Health;
452	(f) The acquisition or otherwise control of any major
453	medical equipment for the provision of medical services; however,
454	(i) the acquisition of any major medical equipment used only for
455	research purposes, and (ii) the acquisition of major medical
456	equipment to replace medical equipment for which a facility is
457	already providing medical services and for which the State
458	Department of Health has been notified before the date of such
459	acquisition shall be exempt from this paragraph; an acquisition
460	for less than fair market value must be reviewed, if the
461	acquisition at fair market value would be subject to review;
462	(g) Changes of ownership of existing health care
463	facilities in which a notice of intent is not filed with the State

(e) The relocation of one or more health services from

464 Department of Health at least thirty (30) days prior to the d

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

489	with	an	existing	health	care	facility	as	defined	in	subparagraph
490	(ix)	of	Section 4	41-7-173	3(h);					

- 491 (1) The replacement or relocation of a health care
 492 facility designated as a critical access hospital shall be exempt
 493 from subsection (1) of this section so long as the critical access
 494 hospital complies with all applicable federal law and regulations
 495 regarding such replacement or relocation;
- 496 (m) Reopening a health care facility that has ceased to
 497 operate for a period of sixty (60) months or more, which reopening
 498 requires a certificate of need for the establishment of a new
 499 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

514	be no prohibition or restrictions on participation in the Medicaid
515	program (Section 43-13-101 et seq.) for the beds in the health
516	care facility that were authorized under this paragraph (a).

- 517 (b) The department may issue certificates of need in
 518 Harrison County to provide skilled nursing home care for
 519 Alzheimer's disease patients and other patients, not to exceed one
 520 hundred fifty (150) beds. From and after July 1, 1999, there
 521 shall be no prohibition or restrictions on participation in the
 522 Medicaid program (Section 43-13-101 et seq.) for the beds in the
 523 nursing facilities that were authorized under this paragraph (b).
 - (C) The department may issue a certificate of need for the addition to or expansion of any skilled nursing facility that is part of an existing continuing care retirement community located 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 This written agreement by the recipient of the program. 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 issuance of a certificate of need to any person under this

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539 paragraph (c), and if such skilled nursing facility at any time 540 after the issuance of the certificate of need, regardless of the ownership of the facility, participates in the Medicaid program or 541 admits or keeps any patients in the facility who are participating 542 543 in the Medicaid program, the State Department of Health shall 544 revoke the certificate of need, if it is still outstanding, and 545 shall deny or revoke the license of the skilled nursing facility, 546 at the time that the department determines, after a hearing 547 complying with due process, that the facility has failed to comply with any of the conditions upon which the certificate of need was 548 549 issued, as provided in this paragraph and in the written agreement 550 by the recipient of the certificate of need. The total number of 551 beds that may be authorized under the authority of this paragraph 552 (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

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564 facility for the elderly in Lowndes County that is owned and 565 operated by a Mississippi nonprofit corporation, not to exceed 566 sixty (60) beds. From and after July 1, 1999, there shall be no 567 prohibition or restrictions on participation in the Medicaid 568 program (Section 43-13-101 et seq.) for the beds in the nursing 569 facility that were authorized under this paragraph (e).

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- The State Department of Health may issue a (f) certificate of need for conversion of a county hospital facility in Itawamba County to a nursing facility, not to exceed sixty (60) beds, including any necessary construction, renovation or expansion. 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 (f).
- 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 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 (q).
- 586 The State Department of Health may issue a 587 certificate of need for the construction or expansion of nursing facility beds or the conversion of other beds to nursing facility 588

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

594 (i) The department may issue a certificate of need for 595 the new construction of a skilled nursing facility in Leake 596 County, provided that the recipient of the certificate of need 597 agrees in writing that the skilled nursing facility will not at any time participate in the Medicaid program (Section 43-13-101 et 598 599 seq.) or admit or keep any patients in the skilled nursing 600 facility who are participating in the Medicaid program. 601 written agreement by the recipient of the certificate of need 602 shall be fully binding on any subsequent owner of the skilled 603 nursing facility, if the ownership of the facility is transferred 604 at any time after the issuance of the certificate of need. 605 Agreement that the skilled nursing facility will not participate 606 in the Medicaid program shall be a condition of the issuance of a 607 certificate of need to any person under this paragraph (i), and if 608 such skilled nursing facility at any time after the issuance of 609 the certificate of need, regardless of the ownership of the 610 facility, participates in the Medicaid program or admits or keeps any patients in the facility who are participating in the Medicaid 611 612 program, the State Department of Health shall revoke the certificate of need, if it is still outstanding, and shall deny or 613

614 revoke the license of the skilled nursing facility, at the time that the department determines, after a hearing complying with due 615 process, that the facility has failed to comply with any of the 616 617 conditions upon which the certificate of need was issued, as 618 provided in this paragraph and in the written agreement by the 619 recipient of the certificate of need. The provision of Section 620 41-7-193(1) regarding substantial compliance of the projection of 621 need as reported in the current State Health Plan is waived for 622 the purposes of this paragraph. The total number of nursing facility beds that may be authorized by any certificate of need 623 624 issued under this paragraph (i) shall not exceed sixty (60) beds. 625 If the skilled nursing facility authorized by the certificate of 626 need issued under this paragraph is not constructed and fully 627 operational within eighteen (18) months after July 1, 1994, the 628 State Department of Health, after a hearing complying with due process, shall revoke the certificate of need, if it is still 629 630 outstanding, and shall not issue a license for the skilled nursing 631 facility at any time after the expiration of the eighteen-month 632 period.

(j) The department may issue certificates of need to
allow any existing freestanding long-term care facility in
Tishomingo County and Hancock County that on July 1, 1995, is
licensed with fewer than sixty (60) beds. For the purposes of
this paragraph (j), 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. 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 long-term care facilities that were
authorized under this paragraph (j).

(k) The department may issue a certificate of need for the construction of a nursing facility at a continuing care retirement community in Lowndes County. The total number of beds that may be authorized under the authority of this paragraph (k) shall not exceed sixty (60) beds. From and after July 1, 2001, the prohibition on the facility participating in the Medicaid program (Section 43-13-101 et seq.) that was a condition of issuance of the certificate of need under this paragraph (k) shall be revised as follows: The nursing facility may participate in the Medicaid program from and after July 1, 2001, if the owner of the facility on July 1, 2001, agrees in writing that no more than thirty (30) of the beds at the facility will be certified for participation in the Medicaid program, and that no claim will be submitted for Medicaid reimbursement for more than thirty (30) patients in the facility in any month or for any patient in the facility who is in a bed that is not Medicaid-certified. written agreement by the owner of the facility shall be a condition of licensure of the facility, and the agreement shall be fully binding on any subsequent owner of the facility if the ownership of the facility is transferred at any time after July 1,

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664 2001. After this written agreement is executed, the Division of 665 Medicaid and the State Department of Health shall not certify more 666 than thirty (30) of the beds in the facility for participation in 667 the Medicaid program. If the facility violates the terms of the 668 written agreement by admitting or keeping in the facility on a 669 regular or continuing basis more than thirty (30) patients who are 670 participating in the Medicaid program, the State Department of 671 Health shall revoke the license of the facility, at the time that 672 the department determines, after a hearing complying with due 673 process, that the facility has violated the written agreement.

- 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.
- (m) The State Department of Health may issue a

 certificate of need to a county-owned hospital in the Second

 Judicial District of Panola County for the conversion of not more

 than seventy-two (72) hospital beds to nursing facility beds,

 provided that the recipient of the certificate of need agrees in

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689	writing that none of the beds at the nursing facility will be
690	certified for participation in the Medicaid program (Section
691	43-13-101 et seq.), and that no claim will be submitted for
692	Medicaid reimbursement in the nursing facility in any day or for
693	any patient in the nursing facility. This written agreement by
694	the recipient of the certificate of need shall be a condition of
695	the issuance of the certificate of need under this paragraph, and
696	the agreement shall be fully binding on any subsequent owner of
697	the nursing facility if the ownership of the nursing facility is
698	transferred at any time after the issuance of the certificate of
699	need. After this written agreement is executed, the Division of
700	Medicaid and the State Department of Health shall not certify any
701	of the beds in the nursing facility for participation in the
702	Medicaid program. If the nursing facility violates the terms of
703	the written agreement by admitting or keeping in the nursing
704	facility on a regular or continuing basis any patients who are
705	participating in the Medicaid program, the State Department of
706	Health shall revoke the license of the nursing facility, at the
707	time that the department determines, after a hearing complying
708	with due process, that the nursing facility has violated the
709	condition upon which the certificate of need was issued, as
710	provided in this paragraph and in the written agreement. If the
711	certificate of need authorized under this paragraph is not issued
712	within twelve (12) months after July 1, 2001, the department shall
713	deny the application for the certificate of need and shall not

- 714 issue the certificate of need at any time after the twelve-month
- 715 period, unless the issuance is contested. If the certificate of
- 716 need is issued and substantial construction of the nursing
- 717 facility beds has not commenced within eighteen (18) months after
- 718 July 1, 2001, the State Department of Health, after a hearing
- 719 complying with due process, shall revoke the certificate of need
- 720 if it is still outstanding, and the department shall not issue a
- 721 license for the nursing facility at any time after the
- 722 eighteen-month period. However, if the issuance of the
- 723 certificate of need is contested, the department shall require
- 724 substantial construction of the nursing facility beds within six
- 725 (6) months after final adjudication on the issuance of the
- 726 certificate of need.
- 727 (n) The department may issue a certificate of need for
- 728 the new construction, addition or conversion of skilled nursing
- 729 facility beds in Madison County, provided that the recipient of
- 730 the certificate of need agrees in writing that the skilled nursing
- 731 facility will not at any time participate in the Medicaid program
- 732 (Section 43-13-101 et seq.) or admit or keep any patients in the
- 733 skilled nursing facility who are participating in the Medicaid
- 734 program. This written agreement by the recipient of the
- 735 certificate of need shall be fully binding on any subsequent owner
- 736 of the skilled nursing facility, if the ownership of the facility
- 737 is transferred at any time after the issuance of the certificate
- 738 of need. Agreement that the skilled nursing facility will not

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

of need if it is still outstanding, and the department shall not issue a license for the nursing facility at any time after the 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 (6) months after final adjudication on the issuance of the

771 The department may issue a certificate of need for 772 the new construction, addition or conversion of skilled nursing facility beds in Leake County, provided that the recipient of the 773 774 certificate of need agrees in writing that the skilled nursing 775 facility will not at any time participate in the Medicaid program 776 (Section 43-13-101 et seq.) or admit or keep any patients in the 777 skilled nursing facility who are participating in the Medicaid 778 This written agreement by the recipient of the 779 certificate of need shall be fully binding on any subsequent owner 780 of the skilled nursing facility, if the ownership of the facility 781 is transferred at any time after the issuance of the certificate 782 of need. Agreement that the skilled nursing facility will not 783 participate in the Medicaid program shall be a condition of the 784 issuance of a certificate of need to any person under this 785 paragraph (o), and if such skilled nursing facility at any time 786 after the issuance of the certificate of need, regardless of the 787 ownership of the facility, participates in the Medicaid program or 788 admits or keeps any patients in the facility who are participating

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certificate of need.

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

313	(6)	months	after	final	adjudication	on	the	issuance	of	the
814	cer	tificate	e of ne	eed.						

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

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

863	expansion of nursing facility beds or the conversion of other beds
864	to nursing facility beds in each county in the state having a need
865	for fifty (50) or more additional nursing facility beds, as shown
866	in the fiscal year 1999 State Health Plan, in the manner provided
867	in this paragraph (q). The total number of nursing facility beds
868	that may be authorized by any certificate of need authorized under
869	this paragraph (q) shall not exceed sixty (60) beds.
870	(ii) Subject to the provisions of subparagraph
871	(v), during each of the next four (4) fiscal years, the department
872	shall issue six (6) certificates of need for new nursing facility
873	beds, as follows: During fiscal years 2000, 2001 and 2002, one
874	(1) certificate of need shall be issued for new nursing facility
875	beds in the county in each of the four (4) Long-Term Care Planning
876	Districts designated in the fiscal year 1999 State Health Plan
877	that has the highest need in the district for those beds; and two
878	(2) certificates of need shall be issued for new nursing facility
879	beds in the two (2) counties from the state at large that have the

Planning Districts in which the counties are located. During
fiscal year 2003, one (1) certificate of need shall be issued for
new nursing facility beds in any county having a need for fifty
(50) or more additional nursing facility beds, as shown in the
fiscal year 1999 State Health Plan, that has not received a
certificate of need under this paragraph (q) during the three (3)

highest need in the state for those beds, when considering the

need on a statewide basis and without regard to the Long-Term Care

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889 the six (6) certificates of need authorized in this subparagraph, 890 the department also shall issue a certificate of need for new 891 nursing facility beds in Amite County and a certificate of need 892 for new nursing facility beds in Carroll County. 893 (iii) Subject to the provisions of subparagraph 894 (v), the certificate of need issued under subparagraph (ii) for nursing facility beds in each Long-Term Care Planning District 895 896 during each fiscal year shall first be available for nursing 897 facility beds in the county in the district having the highest need for those beds, as shown in the fiscal year 1999 State Health 898 899 If there are no applications for a certificate of need for 900 nursing facility beds in the county having the highest need for 901 those beds by the date specified by the department, then the 902 certificate of need shall be available for nursing facility beds 903 in other counties in the district in descending order of the need 904 for those beds, from the county with the second highest need to 905 the county with the lowest need, until an application is received 906 for nursing facility beds in an eligible county in the district. 907 Subject to the provisions of subparagraph (iv) 908 (v), the certificate of need issued under subparagraph (ii) for

previous fiscal years. During fiscal year 2000, in addition to

(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

913 State Health Plan, when considering the need on a statewide basis 914 and without regard to the Long-Term Care Planning Districts in 915 which the counties are located. If there are no applications for 916 a certificate of need for nursing facility beds in either of the 917 two (2) counties having the highest need for those beds on a 918 statewide basis by the date specified by the department, then the 919 certificate of need shall be available for nursing facility beds 920 in other counties from the state at large in descending order of 921 the need for those beds on a statewide basis, from the county with the second highest need to the county with the lowest need, until 922 923 an application is received for nursing facility beds in an 924 eligible county from the state at large.

(v) 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

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938	additional nursing facility beds in that county during the
939	four-year period, and that county shall be excluded in determining
940	which counties have the highest need for nursing facility beds in

941 succeeding fiscal years.

942 If more than one (1) application is made for 943 a certificate of need for nursing home facility beds available

944 under this paragraph (q), in Yalobusha, Newton or Tallahatchie 945

946 located in the county where the nursing facility beds are

947 available, the department shall give priority to the county-owned

County, and one (1) of the applicants is a county-owned hospital

948 hospital in granting the certificate of need if the following

949 conditions are met:

950 1. The county-owned hospital fully meets all 951 applicable criteria and standards required to obtain a certificate 952 of need for the nursing facility beds; and

953 2. The county-owned hospital's qualifications 954 for the certificate of need, as shown in its application and as 955 determined by the department, are at least equal to the 956 qualifications of the other applicants for the certificate of

957 need.

Beginning on July 1, 1999, the State 958 (r)(i) 959 Department of Health shall issue certificates of need during each 960 of the next two (2) fiscal years for the construction or expansion 961 of nursing facility beds or the conversion of other beds to nursing facility beds in each of the four (4) Long-Term Care 962

963	Planning	Districts	designated	in the	fiscal	year	1999	State	Health
964	Plan, to	provide c	are exclusiv	ely to	patient	cs wit	ch Ala	zheime	c's
965	disease.								

(ii) Not more than twenty (20) beds may be

967 authorized by any certificate of need issued under this paragraph 968 (r), and not more than a total of sixty (60) beds may be 969 authorized in any Long-Term Care Planning District by all 970 certificates of need issued under this paragraph (r). However, 971 the total number of beds that may be authorized by all certificates of need issued under this paragraph (r) during any 972 973 fiscal year shall not exceed one hundred twenty (120) beds, and 974 the total number of beds that may be authorized in any Long-Term 975 Care Planning District during any fiscal year shall not exceed 976 forty (40) beds. Of the certificates of need that are issued for 977 each Long-Term Care Planning District during the next two (2) 978 fiscal years, at least one (1) shall be issued for beds in the 979 northern part of the district, at least one (1) shall be issued 980 for beds in the central part of the district, and at least one (1) 981 shall be issued for beds in the southern part of the district. 982

(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

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987 this paragraph (r) to provide care exclusively to patients with 988 Alzheimer's disease.

- 989 The State Department of Health may issue a 990 certificate of need to a nonprofit skilled nursing facility using 991 the Green House model of skilled nursing care and located in Yazoo 992 City, Yazoo County, Mississippi, for the construction, expansion 993 or conversion of not more than nineteen (19) nursing facility 994 beds. For purposes of this paragraph (s), the provisions of 995 Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in the current State Health Plan 996 997 and the provisions of Section 41-7-197 requiring a formal 998 certificate of need hearing process are waived. There shall be no 999 prohibition or restrictions on participation in the Medicaid 1000 program for the person receiving the certificate of need 1001 authorized under this paragraph (s).
- 1002 The State Department of Health shall issue 1003 certificates of need to the owner of a nursing facility in 1004 operation at the time of Hurricane Katrina in Hancock County that 1005 was not operational on December 31, 2005, because of damage 1006 sustained from Hurricane Katrina to authorize the following: 1007 the construction of a new nursing facility in Harrison County; 1008 (ii) the relocation of forty-nine (49) nursing facility beds from the Hancock County facility to the new Harrison County facility; 1009 1010 (iii) the establishment of not more than twenty (20) non-Medicaid nursing facility beds at the Hancock County facility; and (iv) the 1011

1012	establishment of not more than twenty (20) non-Medicaid beds at
1013	the new Harrison County facility. The certificates of need that
1014	authorize the non-Medicaid nursing facility beds under
1015	subparagraphs (iii) and (iv) of this paragraph (t) shall be
1016	subject to the following conditions: The owner of the Hancock
1017	County facility and the new Harrison County facility must agree in
1018	writing that no more than fifty (50) of the beds at the Hancock
1019	County facility and no more than forty-nine (49) of the beds at
1020	the Harrison County facility will be certified for participation
1021	in the Medicaid program, and that no claim will be submitted for
1022	Medicaid reimbursement for more than fifty (50) patients in the
1023	Hancock County facility in any month, or for more than forty-nine
1024	(49) patients in the Harrison County facility in any month, or for
1025	any patient in either facility who is in a bed that is not
1026	Medicaid-certified. This written agreement by the owner of the
1027	nursing facilities shall be a condition of the issuance of the
1028	certificates of need under this paragraph (t), and the agreement
1029	shall be fully binding on any later owner or owners of either
1030	facility if the ownership of either facility is transferred at any
1031	time after the certificates of need are issued. After this
1032	written agreement is executed, the Division of Medicaid and the
1033	State Department of Health shall not certify more than fifty (50)
1034	of the beds at the Hancock County facility or more than forty-nine
1035	(49) of the beds at the Harrison County facility for participation
1036	in the Medicaid program. If the Hancock County facility violates

the terms of the written agreement by admitting or keeping in the facility on a regular or continuing basis more than fifty (50) patients who are participating in the Medicaid program, or if the Harrison County facility violates the terms of the written agreement by admitting or keeping in the facility on a regular or continuing basis more than forty-nine (49) patients who are participating in the Medicaid program, the State Department of Health shall revoke the license of the facility that is in violation of the agreement, at the time that the department determines, after a hearing complying with due process, that the facility has violated the agreement.

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 beds. The facility shall be authorized to keep such ventilator 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

1062 with the projection of need as reported in the current State 1063 Health Plan are waived, and the provisions of Section 41-7-197 requiring a formal certificate of need hearing process are waived. 1064 1065 The beds authorized by this paragraph shall be counted as 1066 pediatric skilled nursing facility beds for health planning 1067 purposes under Section 41-7-171 et seq. There shall be no 1068 prohibition of or restrictions on participation in the Medicaid 1069 program for the person receiving the certificate of need 1070 authorized by this paragraph.

- 1071 (3) The State Department of Health may grant approval for 1072 and issue certificates of need to any person proposing the new construction of, addition to, conversion of beds of or expansion 1073 1074 of any health care facility defined in subparagraph (x) 1075 (psychiatric residential treatment facility) of Section 1076 41-7-173(h). The total number of beds which may be authorized by 1077 such certificates of need shall not exceed three hundred 1078 thirty-four (334) beds for the entire state.
- 1079 (a) Of the total number of beds authorized under this
 1080 subsection, the department shall issue a certificate of need to a
 1081 privately owned psychiatric residential treatment facility in
 1082 Simpson County for the conversion of sixteen (16) intermediate
 1083 care facility for the mentally retarded (ICF-MR) beds to
 1084 psychiatric residential treatment facility beds, provided that
 1085 facility agrees in writing that the facility shall give priority

1086 for the use of those sixteen (16) beds to Mississippi residents
1087 who are presently being treated in out-of-state facilities.

Of the total number of beds authorized under this 1088 subsection, the department may issue a certificate or certificates 1089 1090 of need for the construction or expansion of psychiatric 1091 residential treatment facility beds or the conversion of other beds to psychiatric residential treatment facility beds in Warren 1092 1093 County, not to exceed sixty (60) psychiatric residential treatment 1094 facility beds, provided that the facility agrees in writing that no more than thirty (30) of the beds at the psychiatric 1095 1096 residential treatment facility will be certified for participation 1097 in the Medicaid program (Section 43-13-101 et seq.) for the use of 1098 any patients other than those who are participating only in the Medicaid program of another state, and that no claim will be 1099 submitted to the Division of Medicaid for Medicaid reimbursement 1100 1101 for more than thirty (30) patients in the psychiatric residential 1102 treatment facility in any day or for any patient in the psychiatric residential treatment facility who is in a bed that is 1103 1104 not Medicaid-certified. This written agreement by the recipient 1105 of the certificate of need shall be a condition of the issuance of 1106 the certificate of need under this paragraph, and the agreement 1107 shall be fully binding on any subsequent owner of the psychiatric 1108 residential treatment facility if the ownership of the facility is transferred at any time after the issuance of the certificate of 1109 need. After this written agreement is executed, the Division of 1110

1111	medicald and the state Department of Health Shall not certify more
1112	than thirty (30) of the beds in the psychiatric residential
1113	treatment facility for participation in the Medicaid program for
1114	the use of any patients other than those who are participating
1115	only in the Medicaid program of another state. If the psychiatric
1116	residential treatment facility violates the terms of the written
1117	agreement by admitting or keeping in the facility on a regular or
1118	continuing basis more than thirty (30) patients who are
1119	participating in the Mississippi Medicaid program, the State
1120	Department of Health shall revoke the license of the facility, at
1121	the time that the department determines, after a hearing complying
1122	with due process, that the facility has violated the condition
1123	upon which the certificate of need was issued, as provided in this
1124	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

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1136	to Mississippi residents who are presently being treated in
1137	out-of-state facilities, and (ii) that no more than fifteen (15)
1138	of the beds at the psychiatric residential treatment facility will
1139	be certified for participation in the Medicaid program (Section
1140	43-13-101 et seq.), and that no claim will be submitted for
1141	Medicaid reimbursement for more than fifteen (15) patients in the
1142	psychiatric residential treatment facility in any day or for any
1143	patient in the psychiatric residential treatment facility who is
1144	in a bed that is not Medicaid-certified. This written agreement
1145	by the recipient of the certificate of need shall be a condition
1146	of the issuance of the certificate of need under this paragraph,
1147	and the agreement shall be fully binding on any subsequent owner
1148	of the psychiatric residential treatment facility if the ownership
1149	of the facility is transferred at any time after the issuance of
1150	the certificate of need. After this written agreement is
1151	executed, the Division of Medicaid and the State Department of
1152	Health shall not certify more than fifteen (15) of the beds in the
1153	psychiatric residential treatment facility for participation in
1154	the Medicaid program. If the psychiatric residential treatment
1155	facility violates the terms of the written agreement by admitting
1156	or keeping in the facility on a regular or continuing basis more
1157	than fifteen (15) patients who are participating in the Medicaid
1158	program, the State Department of Health shall revoke the license
1159	of the facility, at the time that the department determines, after
1160	a hearing complying with due process, that the facility has

1161 $$ violated the condition upon which the certificate of need	condition upon which the certificate of nea	ed was
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- 1162 issued, as provided in this paragraph and in the written
- 1163 agreement.
- 1164 (d) Of the total number of beds authorized under this
- 1165 subsection, the department may issue a certificate or certificates
- 1166 of need for the construction or expansion of psychiatric
- 1167 residential treatment facility beds or the conversion of other
- 1168 beds to psychiatric treatment facility beds, not to exceed thirty
- 1169 (30) psychiatric residential treatment facility beds, in either
- 1170 Alcorn, Tishomingo, Prentiss, Lee, Itawamba, Monroe, Chickasaw,
- 1171 Pontotoc, Calhoun, Lafayette, Union, Benton or Tippah County.
- 1172 (e) Of the total number of beds authorized under this
- 1173 subsection (3) the department shall issue a certificate of need to
- 1174 a privately owned, nonprofit psychiatric residential treatment
- 1175 facility in Hinds County for an eight-bed expansion of the
- 1176 facility, provided that the facility agrees in writing that the
- 1177 facility shall give priority for the use of those eight (8) beds
- 1178 to Mississippi residents who are presently being treated in
- 1179 out-of-state facilities.
- 1180 (f) The department shall issue a certificate of need to
- 1181 a one-hundred-thirty-four-bed specialty hospital located on
- 1182 twenty-nine and forty-four one-hundredths (29.44) commercial acres
- 1183 at 5900 Highway 39 North in Meridian (Lauderdale County),
- 1184 Mississippi, for the addition, construction or expansion of
- 1185 child/adolescent psychiatric residential treatment facility beds

1186 in Lauderdale County. As a condition of issuance of the 1187 certificate of need under this paragraph, the facility shall give priority in admissions to the child/adolescent psychiatric 1188 1189 residential treatment facility beds authorized under this 1190 paragraph to patients who otherwise would require out-of-state 1191 placement. The Division of Medicaid, in conjunction with the 1192 Department of Human Services, shall furnish the facility a list of 1193 all out-of-state patients on a quarterly basis. Furthermore, 1194 notice shall also be provided to the parent, custodial parent or 1195 quardian of each out-of-state patient notifying them of the 1196 priority status granted by this paragraph. For purposes of this paragraph, the provisions of Section 41-7-193(1) requiring 1197 1198 substantial compliance with the projection of need as reported in the current State Health Plan are waived. The total number of 1199 1200 child/adolescent psychiatric residential treatment facility beds 1201 that may be authorized under the authority of this paragraph shall 1202 be sixty (60) beds. There shall be no prohibition or restrictions on participation in the Medicaid program (Section 43-13-101 et 1203 1204 seq.) for the person receiving the certificate of need authorized 1205 under this paragraph or for the beds converted pursuant to the 1206 authority of that certificate of need.

(4) (a) From and after * * * July 1, 2024, the department
may issue a certificate of need to any person for the new
construction of any hospital * * * or psychiatric hospital * * *
that will contain any child/adolescent psychiatric * * * beds, or

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

(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 Health Plan are waived. The total number of beds that may be authorized under authority of this subparagraph shall not exceed

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1236	twenty (20) beds. There shall be no prohibition or restrictions
1237	on participation in the Medicaid program (Section 43-13-101 et
1238	seq.) for the hospital receiving the certificate of need
1239	authorized under this subparagraph or for the beds converted
1240	pursuant to the authority of that certificate of need.
1241	(iii) The department may issue a certificate or
1242	certificates of need for the construction or expansion of
1243	child/adolescent psychiatric beds or the conversion of other beds
1244	to child/adolescent psychiatric beds in Warren County. For
1245	purposes of this subparagraph (iii), the provisions of Section
1246	41-7-193(1) requiring substantial compliance with the projection
1247	of need as reported in the current State Health Plan are waived.
1248	The total number of beds that may be authorized under the
1249	authority of this subparagraph shall not exceed twenty (20) beds.
1250	There shall be no prohibition or restrictions on participation in
1251	the Medicaid program (Section 43-13-101 et seq.) for the person
1252	receiving the certificate of need authorized under this
1253	subparagraph or for the beds converted pursuant to the authority
1254	of that certificate of need.
1255	If by January 1, 2002, there has been no significant
1256	commencement of construction of the beds authorized under this
1257	subparagraph (iii), or no significant action taken to convert
1258	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

24/HR31/R809 PAGE 51 (RF\JAB) of need expires, the department may accept applications for issuance of another certificate of need for the beds authorized under this subparagraph, and may issue a certificate of need to authorize the construction, expansion or conversion of the beds authorized under this subparagraph.

The department shall issue a certificate of 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. The total 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.

(v) The department may issue a certificate of need to any county hospital located in Leflore County for the construction or expansion of adult psychiatric beds or the conversion of other beds to adult psychiatric beds, not to exceed twenty (20) beds, provided that the recipient of the certificate

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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.
1309	(vi) The department may issue a certificate or
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 subparagraph (vi), the provisions of Section 41-7-193(1) requiring 1313 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 subparagraph shall not exceed fifteen (15) beds. There shall be 1317 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.

- 1323 (b) From and after July 1, * * * 2024, no

 1324 hospital * * * or psychiatric hospital * * * shall be authorized

 1325 to add any child/adolescent psychiatric * * * beds or convert any

 1326 beds of another category to child/adolescent psychiatric * * *

 1327 beds without a certificate of need under the authority of

 1328 subsection (1) (c) and subsection (4) (a) of this section.
- 1329 (5) The department may issue a certificate of need to a
 1330 county hospital in Winston County for the conversion of fifteen
 1331 (15) acute care beds to geriatric psychiatric care beds.
- 1332 (6) The State Department of Health shall issue a certificate
 1333 of need to a Mississippi corporation qualified to manage a
 1334 long-term care hospital as defined in Section 41-7-173(h)(xii) in
 1335 Harrison County, not to exceed eighty (80) beds, including any

1336	necessary renovation or construction required for licensure and
1337	certification, provided that the recipient of the certificate of
1338	need agrees in writing that the long-term care hospital will not
1339	at any time participate in the Medicaid program (Section 43-13-101
1340	et seq.) or admit or keep any patients in the long-term care
1341	hospital who are participating in the Medicaid program. This
1342	written agreement by the recipient of the certificate of need
1343	shall be fully binding on any subsequent owner of the long-term
1344	care hospital, if the ownership of the facility is transferred at
1345	any time after the issuance of the certificate of need. Agreement
1346	that the long-term care hospital will not participate in the
1347	Medicaid program shall be a condition of the issuance of a
1348	certificate of need to any person under this subsection (6), and
1349	if such long-term care hospital at any time after the issuance of
1350	the certificate of need, regardless of the ownership of the
1351	facility, participates in the Medicaid program or admits or keeps
1352	any patients in the facility who are participating in the Medicaid
1353	program, the State Department of Health shall revoke the
1354	certificate of need, if it is still outstanding, and shall deny or
1355	revoke the license of the long-term care hospital, at the time
1356	that the department determines, after a hearing complying with due
1357	process, that the facility has failed to comply with any of the
1358	conditions upon which the certificate of need was issued, as
1359	provided in this subsection and in the written agreement by the
1360	recipient of the certificate of need. For purposes of this

L361	subsection,	the provisions of Section 41-7-193(1) requiring
L362	substantial	compliance with the projection of need as reported in
1363	the current	State Health Plan are waived.

1364 (7) The State Department of Health may issue a certificate 1365 of need to any hospital in the state to utilize a portion of its 1366 beds for the "swing-bed" concept. Any such hospital must be in conformance with the federal regulations regarding such swing-bed 1367 1368 concept at the time it submits its application for a certificate 1369 of need to the State Department of Health, except that such 1370 hospital may have more licensed beds or a higher average daily 1371 census (ADC) than the maximum number specified in federal 1372 regulations for participation in the swing-bed program. Any 1373 hospital meeting all federal requirements for participation in the swing-bed program which receives such certificate of need shall 1374 1375 render services provided under the swing-bed concept to any 1376 patient eligible for Medicare (Title XVIII of the Social Security Act) who is certified by a physician to be in need of such 1377 services, and no such hospital shall permit any patient who is 1378 1379 eligible for both Medicaid and Medicare or eligible only for 1380 Medicaid to stay in the swing beds of the hospital for more than 1381 thirty (30) days per admission unless the hospital receives prior 1382 approval for such patient from the Division of Medicaid, Office of 1383 the Governor. Any hospital having more licensed beds or a higher average daily census (ADC) than the maximum number specified in 1384 federal regulations for participation in the swing-bed program 1385

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

1402 The Department of Health shall not grant approval for or (8) issue a certificate of need to any person proposing the new 1403 1404 construction of, addition to or expansion of a health care 1405 facility as defined in subparagraph (viii) of Section 41-7-173(h), 1406 except as hereinafter provided: The department may issue a 1407 certificate of need to a nonprofit corporation located in Madison County, Mississippi, for the construction, expansion or conversion 1408 1409 of not more than twenty (20) beds in a community living program for developmentally disabled adults in a facility as defined in 1410

1411 subparagraph (viii) of Section 41-7-173(h). For purposes of this 1412 subsection (8), the provisions of Section 41-7-193(1) requiring substantial compliance with the projection of need as reported in 1413 the current State Health Plan and the provisions of Section 1414 1415 41-7-197 requiring a formal certificate of need hearing process 1416 are waived. There shall be no prohibition or restrictions on participation in the Medicaid program for the person receiving the 1417 1418 certificate of need authorized under this subsection (8).

- (9) The Department of Health shall not grant approval for or issue a certificate of need to any person proposing the establishment of, or expansion of the currently approved territory 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).
- 1427 (10) Health care facilities owned and/or operated by the state or its agencies are exempt from the restraints in this 1428 1429 section against issuance of a certificate of need if such addition 1430 or expansion consists of repairing or renovation necessary to 1431 comply with the state licensure law. This exception shall not 1432 apply to the new construction of any building by such state 1433 facility. This exception shall not apply to any health care facilities owned and/or operated by counties, municipalities, 1434

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1435 districts, unincorporated areas, other defined persons, or any 1436 combination thereof.

- 1437 The new construction, renovation or expansion of or addition to any health care facility defined in subparagraph (ii) 1438 1439 (psychiatric hospital), subparagraph (iv) (skilled nursing 1440 facility), subparagraph (vi) (intermediate care facility), subparagraph (viii) (intermediate care facility for the mentally 1441 1442 retarded) and subparagraph (x) (psychiatric residential treatment 1443 facility) of Section 41-7-173(h) which is owned by the State of 1444 Mississippi and under the direction and control of the State Department of Mental Health, and the addition of new beds or the 1445 1446 conversion of beds from one category to another in any such 1447 defined health care facility which is owned by the State of Mississippi and under the direction and control of the State 1448 Department of Mental Health, shall not require the issuance of a 1449 1450 certificate of need under Section 41-7-171 et seq., 1451 notwithstanding any provision in Section 41-7-171 et seq. to the 1452 contrary.
- 1453 (12) The new construction, renovation or expansion of or
 1454 addition to any veterans homes or domiciliaries for eligible
 1455 veterans of the State of Mississippi as authorized under Section
 1456 35-1-19 shall not require the issuance of a certificate of need,
 1457 notwithstanding any provision in Section 41-7-171 et seq. to the
 1458 contrary.

1459	(13) The repair or the rebuilding of an existing, operating
1460	health care facility that sustained significant damage from a
1461	natural disaster that occurred after April 15, 2014, in an area
1462	that is proclaimed a disaster area or subject to a state of
1463	emergency by the Governor or by the President of the United States
1464	shall be exempt from all of the requirements of the Mississippi
1465	Certificate of Need Law (Section 41-7-171 et seq.) and any and all
1466	rules and regulations promulgated under that law, subject to the
1467	following conditions:

- (a) The repair or the rebuilding of any such damaged health care facility must be within one (1) mile of the pre-disaster location of the campus of the damaged health care facility, except that any temporary post-disaster health care facility operating location may be within five (5) miles of the pre-disaster location of the damaged health care facility;
- (b) The repair or the rebuilding of the damaged health care facility (i) does not increase or change the complement of its bed capacity that it had before the Governor's or the President's proclamation, (ii) does not increase or change its levels and types of health care services that it provided before the Governor's or the President's proclamation, and (iii) does not rebuild in a different county; however, this paragraph does not restrict or prevent a health care facility from decreasing its bed capacity that it had before the Governor's or the President's proclamation, or from decreasing the levels of or decreasing or

1484	eliminating the types of health care services that it provided
1485	before the Governor's or the President's proclamation, when the
1486	damaged health care facility is repaired or rebuilt;

- 1487 (c) The exemption from Certificate of Need Law provided
 1488 under this subsection (13) is valid for only five (5) years from
 1489 the date of the Governor's or the President's proclamation. If
 1490 actual construction has not begun within that five-year period,
 1491 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.

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

certificate of need to any hospital which is currently licensed for two hundred fifty (250) or more acute care beds and is located in any general hospital service area not having a comprehensive cancer center, for the establishment and equipping of such a center which provides facilities and services for outpatient radiation oncology therapy, outpatient medical oncology therapy, and appropriate support services including the provision of

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radiation therapy services. The provisions of Section 41-7-193(1) regarding substantial compliance with the projection of need as reported in the current State Health Plan are waived for the purpose of this subsection.

1513 (15) The State Department of Health may authorize the
1514 transfer of hospital beds, not to exceed sixty (60) beds, from the
1515 North Panola Community Hospital to the South Panola Community
1516 Hospital. The authorization for the transfer of those beds shall
1517 be exempt from the certificate of need review process.

1518 (16)The State Department of Health shall issue any 1519 certificates of need necessary for Mississippi State University and a public or private health care provider to jointly acquire 1520 1521 and operate a linear accelerator and a magnetic resonance imaging 1522 Those certificates of need shall cover all capital 1523 expenditures related to the project between Mississippi State 1524 University and the health care provider, including, but not 1525 limited to, the acquisition of the linear accelerator, the magnetic resonance imaging unit and other radiological modalities; 1526 1527 the offering of linear accelerator and magnetic resonance imaging 1528 services; and the cost of construction of facilities in which to 1529 locate these services. The linear accelerator and the magnetic 1530 resonance imaging unit shall be (a) located in the City of Starkville, Oktibbeha County, Mississippi; (b) operated jointly by 1531 Mississippi State University and the public or private health care 1532 1533 provider selected by Mississippi State University through a

request for proposals (RFP) process in which Mississippi State 1534 1535 University selects, and the Board of Trustees of State Institutions of Higher Learning approves, the health care provider 1536 1537 that makes the best overall proposal; (c) available to Mississippi 1538 State University for research purposes two-thirds (2/3) of the 1539 time that the linear accelerator and magnetic resonance imaging unit are operational; and (d) available to the public or private 1540 1541 health care provider selected by Mississippi State University and 1542 approved by the Board of Trustees of State Institutions of Higher 1543 Learning one-third (1/3) of the time for clinical, diagnostic and 1544 treatment purposes. For purposes of this subsection, the provisions of Section 41-7-193(1) requiring substantial compliance 1545 1546 with the projection of need as reported in the current State Health Plan are waived. 1547

1548 The State Department of Health shall issue a 1549 certificate of need for the construction of an acute care hospital 1550 in Kemper County, not to exceed twenty-five (25) beds, which shall be named the "John C. Stennis Memorial Hospital." In issuing the 1551 1552 certificate of need under this subsection, the department shall 1553 give priority to a hospital located in Lauderdale County that has 1554 two hundred fifteen (215) beds. For purposes of this subsection, 1555 the provisions of Section 41-7-193(1) requiring substantial 1556 compliance with the projection of need as reported in the current 1557 State Health Plan and the provisions of Section 41-7-197 requiring a formal certificate of need hearing process are waived. 1558

shall be no prohibition or restrictions on participation in the

Medicaid program (Section 43-13-101 et seq.) for the person or

entity receiving the certificate of need authorized under this

subsection or for the beds constructed under the authority of that

certificate of need.

1564 (18)The planning, design, construction, renovation, addition, furnishing and equipping of a clinical research unit at 1565 1566 any health care facility defined in Section 41-7-173(h) that is 1567 under the direction and control of the University of Mississippi Medical Center and located in Jackson, Mississippi, and the 1568 addition of new beds or the conversion of beds from one (1) 1569 1570 category to another in any such clinical research unit, shall not 1571 require the issuance of a certificate of need under Section 41-7-171 et seq., notwithstanding any provision in Section 1572 1573 41-7-171 et seq. to the contrary.

1574 (19) [Repealed]

1575 (20) Nothing in this section or in any other provision of
1576 Section 41-7-171 et seq. shall prevent any nursing facility from
1577 designating an appropriate number of existing beds in the facility
1578 as beds for providing care exclusively to patients with
1579 Alzheimer's disease.

1580 (21) Nothing in this section or any other provision of
1581 Section 41-7-171 et seq. shall prevent any health care facility
1582 from the new construction, renovation, conversion or expansion of
1583 new beds in the facility designated as intensive care units,

1584	negative pressure rooms, or isolation rooms pursuant to the
1585	provisions of Sections 41-14-1 through 41-14-11, or Section
1586	41-14-31. For purposes of this subsection, the provisions of
1587	Section 41-7-193(1) requiring substantial compliance with the
1588	projection of need as reported in the current State Health Plan
1589	and the provisions of Section 41-7-197 requiring a formal
1590	certificate of need hearing process are waived.
1591	SECTION 3. This act shall take effect and be in force from
1592	and after July 1, 2024.