

# DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH SECRETARY

> MARK PAYNE DIRECTOR

May 31, 2017

Reid Caldwell 300 West 27<sup>th</sup> Street P.O. Box 1408 Lumberton, NC 28359

## **Exempt from Review**

Record #:

2283

Facility Name:

Southeastern Regional Medical Center

FID #:

050636

**Business Name:** 

Southeastern Regional Medical Center

Business #:

1685

Project Description:

Relocate existing inpatient surgical services within the hospital on the

main campus

County:

Robeson

Dear Mr. Caldwell:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letters of February 23, 2017 and April 21, 2017, and subsequent emails, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(g). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

However, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections to determine if they have any requirements for development of the proposed project.

It should be noted that this determination is binding only for the facts represented by you. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by the Agency. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate;

## HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

WWW.NCDHHS.GOV TELEPHONE 919-855-3873

LOCATION: EDGERTON BUILDING • 809 RUGGLES DRIVE • RALEIGH, NC 27603 MAILING ADDRESS: 2704 MAIL SERVICE CENTER •RALEIGH, NC 27699-2704 AN EQUAL OPPORTUNITY/ AFFIRMATIVE ACTION EMPLOYER

(3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Tanya S. Rupp

Project Analyst

Martha J. Frisone

Chief, Healthcare Planning and Certificate of Need

cc:

Construction Section, DHSR

Acute and Home Care Licensure and Certification Section, DHSR Paige Bennett, Assistant Chief, Healthcare Planning, DHSR



# Better Health - Starting With You

April 21, 2017

Tanya Rupp, Project Analyst Department of Health and Human Services Certificate of Need Section 2704 Mail Service Center Raleigh, North Carolina 27603

Re: Information Request for Exemption Pursuant to N.C. Gen. Stat. §131E-184(g)

Facility: Southeastern Regional Medical Center

Project Description: Relocate existing inpatient surgical services in the hospital

County: Robeson FID #: 050636

Dear Ms. Rupp:

Below and attached is the additional information you have requested:

- 1. See attached.
- 2. 300 W. 27th Street, Lumberton, NC
- 3. N/A SRMC is one building.
- 4. N/A The project will be within the Medical Center.
- 5. See attached schematic
- 6. N/A The project will be within the Medical Center.
- 7. a) See attached schematic; b) N/A no new construction
- 8. The financial and administrative control of the ORs rests with SRMC. Please see attached organization chart.
- 9. See above.
- 10. The sole purpose of the project is to:
  - a. Renovate existing space.
  - b. Replace existing services on the same site.
  - c. Expand the physical plant without adding any new services or major medical equipment.
- 11. The project will not result in:
  - a. The offering of health services not currently provided.
  - b. The acquisition of additional units of major medical equipment.
  - c. An increase in the number of beds, ORs or endoscopy rooms.



1)	Type of OR Room	Licensed OR Rooms	OR Rooms Licensed After Project	Comments
	Dedicated Open Heart Surgical	1	1	Not part of project
	Dedicated C-Section	1	1	Not part of project
	Shared-IP/ Ambulatory Surgical	5	5	Only 4 ORs are included in this project - 1 OR located in Heart Center
	Total of Surgical Operating Rooms	7	7	
	Type of Room Endoscopy	Current Licensed	Licensed After Project	

2) Current licensed acute care and psych beds at this site

Licensed acute care and psych beds at this site

after project

325

If you have any questions, please do not hesitate to contact me.

325

Sincerely,

Reid Caldwell, FACHE

Government Affairs & Policy Management Officer

Reid Caldwell

WRC:jlb

Attachments

# State of Aurth Carolina Department of Health and Human Services Division of Health Service Regulation

Effective January 01, 2017, this license is issued to

Southeastern Regional Medical Center

to operate a hospital known as

Southeastern Regional Medical Center

located in Lumberton, North Carolina, Robeson County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall remain in effect until amended by the issuing agency.

Facility ID: 923461
License Number: H0064

Bed Capacity: 452

General Acute 292, Psych 33, Hospice 12,

Nursing: 115

Dedicated Inpatient Surgical Operating Rooms: 2

Dedicated Ambulatory Surgical Operating Rooms: 0

Shared Surgical Operating Rooms:

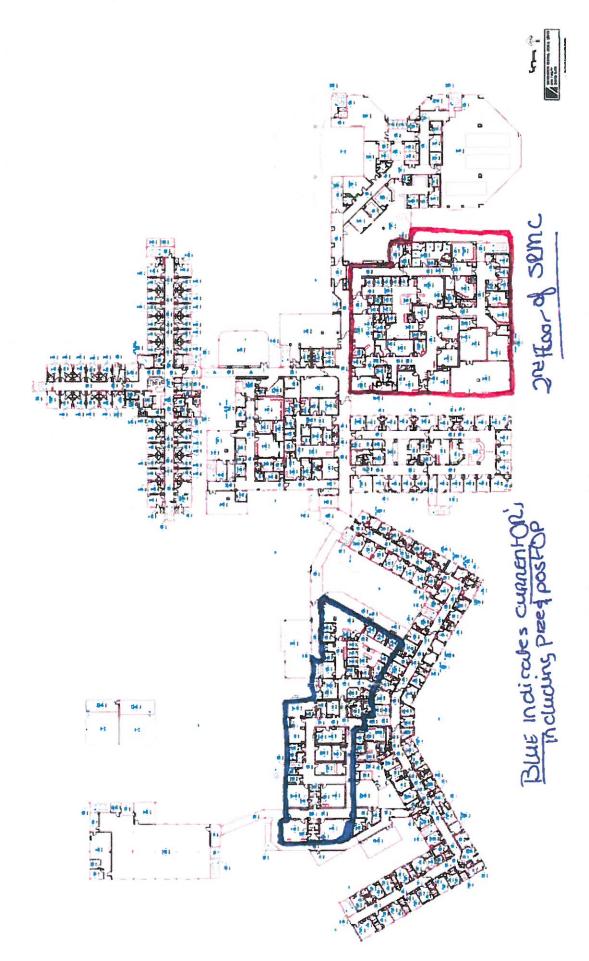
Dedicated Endoscopy Rooms: 1

Authorized, by:

Secretary, N.C. Department of Health and Human Services

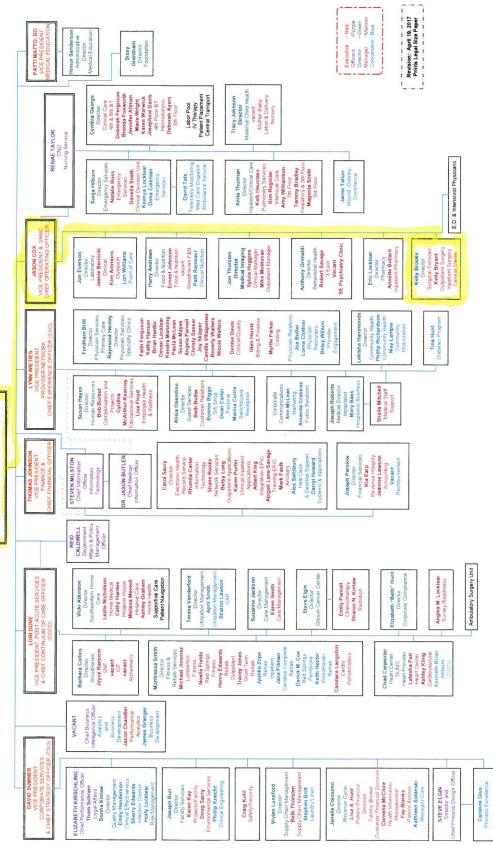


Director, Division of Health Service Regulation



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JOANN ANDERSON
PRESIDENT & CHIEF EXECUTIVE OFFICER





# DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH

SECRETARY

MARK PAYNE DIRECTOR

March 30, 2017

Reid Caldwell 300 West 27<sup>th</sup> Street P.O. Box 1408 Lumberton, NC 28359

Information Request for Exemption Pursuant to N.C. Gen. Stat. §131E-184(g)

Facility:

Southeastern Regional Medical Center

Project Description:

Relocate existing inpatient surgical services in the hospital

County:

Robeson

FID #:

050636

Dear Mr. Caldwell:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter dated February 23, 2017 regarding the above reference proposal. However, additional information is needed to determine if the project is exempt from review pursuant to N.C. Gen. Stat. §131E-184(g).

Provide a written response to each of the following.

- 1. A copy of the health service facility's current license.
- 2. The street address of the site of the proposed renovations or construction.
- 3. If the site of the proposed renovations or construction consists of multiple buildings, identify which of those buildings, by name and number, is the main building.
- 4. If the site of the proposed renovations or construction is not the main building, provide the name and number of the building(s) to be renovated or constructed.
- 5. A site plan drawn to scale identifying the main building and the site of the proposed renovations or construction.
- 6. If the site of the proposed renovations or construction is not strictly contiguous to the main building, documentation that it is located within 250 yards of the main building.
- 7. Design schematics drawn to scale showing:
  - a. each area to be renovated; and

# HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

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- b. each area of new construction that replaces existing space.
- 8. Documentation that <u>financial control of the entire licensed health service facility</u> is exercised at the site of the proposed renovations or construction.
- 9. Documentation that <u>administrative control of the entire licensed health service facility</u> is exercised at the site of the proposed renovations or construction.
- 10. Documentation that the sole purpose of the project is to:
  - a. Renovate existing space;
  - b. Replace existing services on the same site; or
  - c. Expand the physical plant without adding any new services or major medical equipment.
- 11. Documentation that the project will NOT result in:
  - a. the offering of health services not currently provided;
  - b. the acquisition of additional units of major medical equipment; or
  - c. an increase in the number of beds, operating rooms, gastrointestinal endoscopy rooms, etc.

If you have any questions concerning this request, please do not hesitate to call this office.

Sincerely,

Tanya S. Rupp

Project Analyst, Certificate of Need

TSR: tr

# Rupp, Tanya

From:

Bennett, Samantha A < Bennet07@srmc.org>

Sent:

Friday, May 26, 2017 11:27 AM

To:

Rupp, Tanya

Cc:

Caldwell, Reid

Subject: Attachments: CON letter dated 2/23/2017 Letter to Tanya Rupp re Exemption.pdf

Importance:

High

Hi Ms. Rupp,

Attached please find the copy of the letter you requested.

Hope you are well! ©

Sam

Camantha Bennett

Grants & Governmental Affairs Specialist

Southeastern Health

300 West 27 Street

P.C. Box 1408

Lumberton, N.C. 28358

Bennet07@srmc.org

(910) 671-5676



February 23, 2017

Tanya Rupp, Project Analyst Department of Health and Human Services Certificate of Need Section 2704 Mail Service Center Raleigh, N.C. 27603

Re:

Notification of exemption from Certificate of Need review for a capital that

exceeds \$2 million

Facility:

Southeastern Regional Medical Center

County:

Robeson

Dear Ms. Rupp:

Pursuant to GS 131E-176 16 (u) Definitions and GS 131E-184 (e) Exemptions for Review, Southeastern Regional Medical Center is hereby providing written notice to inform you of our intent to relocate, to new space on the SRMC main campus, the existing inpatient surgical service. The existing inpatient surgical service is in space on the second floor of the main building that was originally built in 1953. We will relocate the inpatient surgical service to existing space on the second floor of the Diagnostic and Treatment Building on the hospital's main campus. This space was vacated in 2015 when outpatient surgical services was relocated to an off campus, freestanding Ambulatory Surgical Center. This vacated space is 30 years old and needs to be renovated to accommodate the needs of a new and expanded inpatient surgical service.

SRMC is proposing to renovate the 17,600 square foot vacated area at a total cost of approximately \$14.5 million inclusive of equipment. At the completion of the project, the existing four (4) licensed operating rooms and one (1) endoscopy room will be relocated. There will be no change in the licensed number of ORs or endoscopy rooms. The project will begin in Spring 2017 and will be completed in May 2018.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Reid Caldwell, FACHE

Government Affairs & Policy Management Officer

Reid Coldwell

WRC:jlb