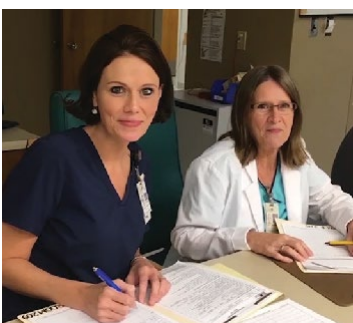


2024 South Carolina Health Plan

Enacted March 8, 2024



SOUTH CAROLINA HEALTH PLANNING COMMITTEE

MEMBER	REPRESENTING	EXPIRATION
Anne Summer	1st District, Business	6/30/2024
Gokul Gondi, MD	2nd District Health Care, Provider	6/30/2025
McKenzie Speed	3rd District	6/30/2026
Sonya Younger	4th District, Health Care, Consumer	6/30/2026
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Elbert R. Malone	6th District	6/30/2025
Tim Holland	7th District	6/30/2024
Bradley W. Moorhouse	Admin of licensed For Profit Nursing Home	6/30/2016
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CHAPTER 1

INTRODUCTION

SOUTH CAROLINA HEALTH PLAN

The South Carolina Code of Laws requires the Department of Health and Environmental Control ("Department") to prepare a South Carolina Health Plan ("Plan"), with the advice of the Health Planning Committee, for use in the administration of the Certificate of Need Program. See § 44-7-180(8).

CERTIFICATE OF NEED

Certificate of Need (CON) must be obtained from the Department before undertaking certain health care related projects. Specifically, a person or nursing home is required to obtain a CON prior to undertaking: the construction or other establishment of a new nursing home; a change in the existing bed complement of a nursing home through the addition of one or more beds or change in the classification of licensure of one or more beds; and other projects enumerated in statute. See § 44-7-160(A). A home health agency shall obtain a CON before licensure. See § 44-69-75(A). Finally, a person or health care facility is required to obtain a CON prior to undertaking: the construction or other establishment of a hospital; and a change in the existing bed complement of a hospital through the addition of one or more beds or change in the classification of licensure of one or more beds. See § 44-7-160(6). Effective January 1, 2027, the CON requirements for hospitals are repealed. See § 44-7-160(C).

HEALTH PLANNING COMMITTEE

The Health Planning Committee advises the Department in the drafting of the South Carolina Health Plan. It is comprised of fourteen members, twelve of whom are appointed by the Governor, which must include at least one member from each congressional district. One member is appointed by the chairman of the Department's Board, and by virtue of their office, the final member is either the South Carolina Consumer Advocate or their designee. Health care consumers, health care financiers (including business and insurance), and health care providers (which must include at least one administrator of a for-profit nursing home) are represented. The Health Planning Committee reviews the South Carolina Health Plan and submits it to the Board of Health and Environmental Control for final revision and adoption. See § 44-7-180.

STATUTORY REQUIREMENTS

In accordance with § 44-7-180(8), this Plan contains (1) an *inventory* of existing and CON

approved health care facilities, beds, specified health services and equipment; (2) *projections of need* for additional health care facilities, beds, specified health services, and equipment; (3) *standards for distribution* of health care facilities, beds, specified health services, and equipment ("Certificate of Need Standards"); and (4) a general statement as to the *project review criteria* considered to be the most important in evaluating Certificate of Need applications for each type of facility, service and equipment. Effective May 16, 2023, Act No. 20 substantially revised Certificate of Need requirements. As a result, inventories, projections of need, and standards for many health care facilities, services, and equipment no longer requiring Certificate of Need have been removed from the 2023 update to the South Carolina Health Plan.

(1) INVENTORY

Chapter 2 of this Plan identifies the inventory regions and service areas used in the administration of the Certificate of Need Program. Health care facilities, specified health services, beds and equipment are inventoried where applicable.

(2) PROJECTIONS OF NEED

Chapters 3 through 5 of this Plan discuss the need for additional health care facilities, beds, specified health services and equipment in the State. While the methodologies used to determine these needs vary depending on the type of healthcare facility, bed, specified health service, or equipment, a determination of projected need is calculated for most areas addressed by the Plan.

(3) CERTIFICATE OF NEED STANDARDS

In consultation with the Health Planning Committee, the Department formulated these standards to guide health providers throughout the State. Inclusion of these standards in the application process is designed to give applicants notice of its requirements and to elicit from them a commitment to incorporate these standards into both their applications and finished projects.

(4) PROJECT REVIEW CRITERIA

A general statement has been added to most sections of the Plan setting forth the Project Review Criteria considered to be the most important in reviewing Certificate of Need applications for each type of health care facility, bed, specified health service, and equipment. The staff may reorder the relative importance of the Project Review Criteria no more than one (1) time. The staff's reordering of the relative importance of the Project Review Criteria does not extend the review period. These criteria can be found in Regulation 61-15. Where appropriate, the Plan contains a finding as to whether the benefits of improved accessibility to each such type of facility, service and equipment may outweigh the adverse effects caused by the duplication of any existing facility, service or equipment.

DISCLAIMERS

- (1) The hyperlinks provided throughout this Plan were checked for accuracy immediately prior to publication. Due to factors outside our control, we cannot guarantee the links will not expire or otherwise become unavailable after publication. Should you be unable to access the hyperlinked information, please feel free to request the information from the Certificate of Need Program via e-mail (coninfo@dhec.sc.gov).

- (2) The population data set forth in this Plan was received from the South Carolina Revenue and Fiscal Affairs Office in October of 2022. The material includes population projections that are subject to the following conditions:

These projections offer only one scenario of future population change using the most current data available. They are intended to demonstrate a likely scenario if future events unfold in a manner that reflects previous trends observed within each group. The model cannot account for unprecedented events that may significantly alter an area's demographic composition in the future. The possible events include large factory openings or closings, changes in technology, public health crises, environmental events, changes in the economy or other conditions that could affect birth rates, death rates, or domestic and international migration. This means that population projections are likely to be more accurate in the immediate future than in distant years into the future

CHAPTER 2

INVENTORY REGIONS AND SERVICE AREAS

INVENTORY REGIONS

This Plan has adopted the Department's regions for the purpose of inventorying Health Care Facilities and Health Services as designated and enumerated below:

<u>Region</u>	<u>Counties</u>
I - Upstate	Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, McCormick, Oconee, Pickens, Spartanburg, and Union
II - Midlands	Aiken, Barnwell, Chester, Edgefield, Fairfield, Kershaw, Lancaster, Lexington, Newberry, Richland, Saluda and York
III - Pee Dee	Chesterfield, Clarendon, Darlington, Dillon, Florence, Georgetown, Horry, Lee, Marion, Marlboro, Sumter and Williamsburg
IV- Lowcountry	Allendale, Bamberg, Beaufort, Berkeley, Calhoun, Charleston, Colleton, Dorchester, Hampton, Jasper and Orangeburg

NEED FOR HEALTH CARE FACILITIES AND BEDS

This Plan calculates the need for certain Health Care Facilities and Health Services throughout South Carolina based on certain formulae and criteria set forth in detail in this Plan. For example:

- The need for hospital beds is based on the utilization of individual facilities.
- The need for acute psychiatric beds, alcohol and drug abuse beds, and comprehensive rehabilitation beds is based on various service areas and utilization methodologies specified in this Plan.
- The need for long-term care and skilled nursing beds is projected by county.

SERVICE AREAS

In addition to inventory regions, this Plan designates service areas for certain Health Care Facilities and Health Services. These service areas may be comprised of one or more counties. Service areas may cross the inventory regions identified above. The need for a service is analyzed by assessment of existing resources and need in the relevant service area, along with other factors set forth in this Plan, applicable statutes and regulations.

BED TRANSFER BETWEEN AFFILIATED FACILITIES

Given the ever-changing nature of the health care delivery system, affiliated facilities may want to transfer or exchange licensed beds in order to better meet an identified need. Affiliated facilities are two or more nursing homes or hospitals, whether owned, leased, or who have a formal legal relationship with a central organization and whose relationship has been established for reasons other than for transferring beds. In certain instances such a transfer or exchange of beds could be accomplished in a cost-effective manner and result in a more efficient allocation of health care resources. *A Certificate of Need is required to transfer or exchange beds.* To evaluate a proposal for the transfer or exchange of beds reviewed under the Certificate of Need program, the following criteria must be applied to it:

1. A transfer or exchange of beds may be approved only if there is no overall increase in the number or amount of such beds.
2. A transfer or exchange initiated under this Chapter may only occur within the service area(s) established in this Plan.
3. The facility receiving the beds must demonstrate the need for the additional capacity based on historical and/or projected utilization patterns.
4. The applicants must explain the impact of transferring the beds on the health care delivery system of the county and/or service area from which it is to be taken; any negative impact must be detailed, along with the perceived benefits of the proposal.
5. The facility giving up beds may not use the loss of such beds as justification for a subsequent request to establish or re-establish such beds.
6. A written contract or agreement between the governing bodies of the affiliated facilities approving the transfer or exchange of beds must be included in the Certificate of Need application.
7. Each facility giving up beds must acknowledge in writing that this exchange is permanent; any further transfers would be subject to this same process.

ESTIMATED STATE CIVILIAN POPULATION

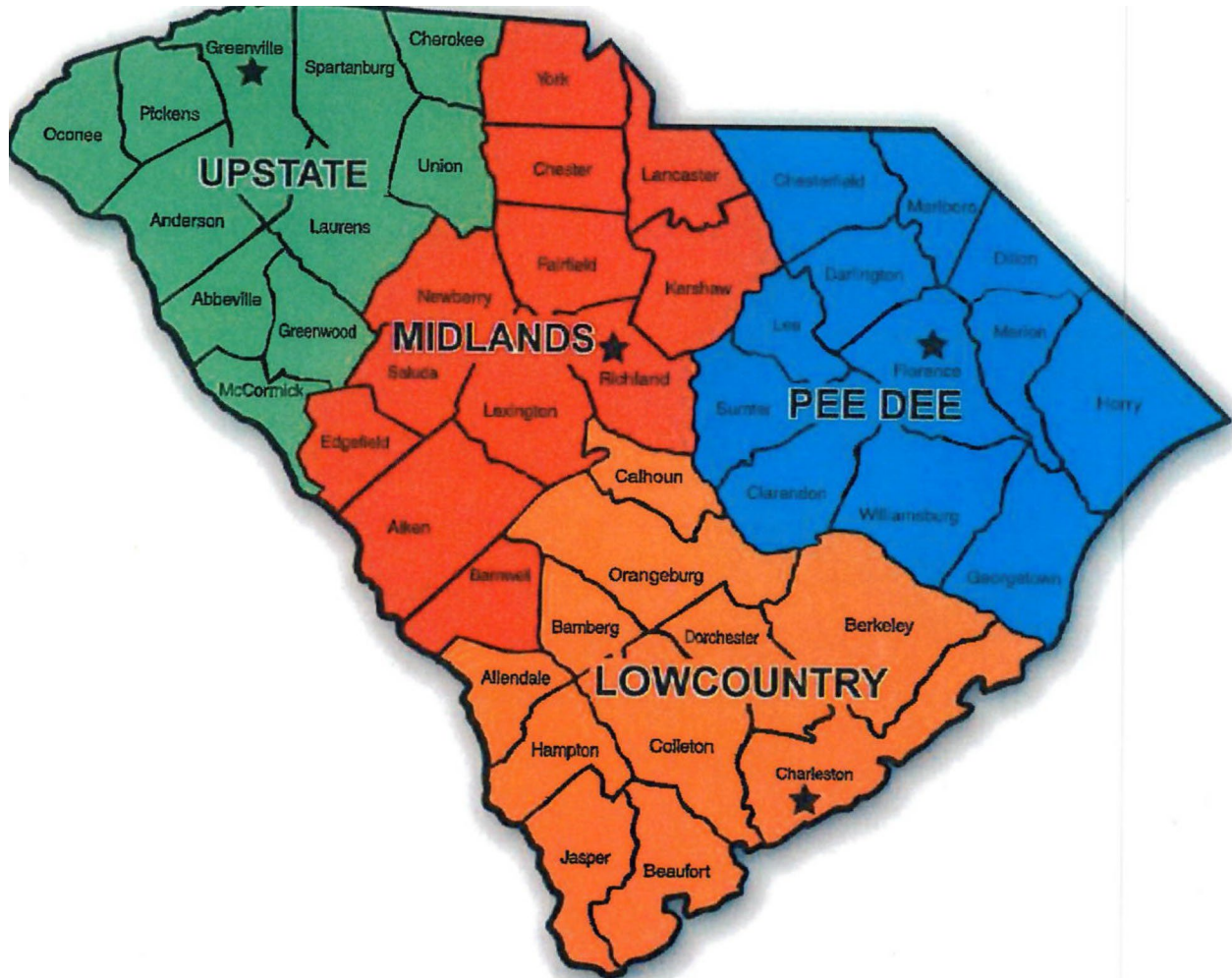
Where these projections were required for calculations, this Plan has been developed using the estimated civilian population of 5,177,874 for 2021 and projected population of 5,460,568 for 2027. All population data (county, planning area, and statewide) were provided by the South Carolina Revenue and Fiscal Affairs Office, Health and Demographics Section, in October 2022.

INVENTORY DATES

Only those facilities reviewed under the Certificate of Need program are included in the inventory. The cut-off date for inclusion of information in this Plan was December 31, 2022. Inventory and utilization data set forth in this Plan is derived from the 2021 Joint Annual Reports (JARs). The period of time in which the individual data was collected is set forth by the reporting entity in its individual JAR submission.

DHEC REGIONS MAP

(Chapter 2)



CHAPTER 3

NURSING HOMES

NURSING HOMES

Nursing homes provide inpatient care for convalescent or chronic disease residents who require nursing care and related medical services. This care is performed under the general direction of persons licensed to practice medicine, surgery, or osteopathy in the State. Facilities furnishing primarily domiciliary care are not included. The licensing list of nursing homes also denotes the facilities that have Alzheimer's units. For more specific detail about nursing homes, refer to [Regulation 61-17](#) (*Standards for Licensing Nursing Homes*).

Since the vast majority of patients utilizing nursing homes are 65 years of age or older, only this segment of the population is used in the need calculations. County bed needs are projected through 2027. A two-year projection is used because nursing homes can be constructed and become operational in two years.

CERTIFICATE OF NEED PROIECTIONS AND STANDARDS

1. Based on observations of methodologies from other states operating a Certificate of Need regime, and recognizing that potential reliance on long-term skilled nursing services increases with age, bed need is calculated on a county basis using the following ratios:
 - a) 10 beds/1,000 population aged 65-74; and
 - b) 58 beds/1,000 population aged 75 and over
2. For each county, these needs are calculated separately. The individual age-group needs are then added together, and the existing bed count subtracted from that total to determine the deficit or surplus of beds.
3. When a county shows surplus beds, additional beds will not be approved, except to allow an individual nursing home to add some additional beds in order to make more economical nursing units. These additions are envisioned as small increments in order to increase the efficiency of the nursing home. This exception for additional beds will not be approved if it results in a three-bed ward. A nursing home may add up to 16 additional beds per nursing unit to create either 44 or 60 bed nursing units, regardless of the projected bed need for the county. The nursing home must document how these additional beds will make a more economical unit(s).

4. Some Institutional Nursing Homes are dually. licensed, with some beds restricted to residents of the retirement community and the remaining beds available to the general public. The beds restricted to residents of the retirement community are not eligible to be certified for Medicare or Medicaid. Should such a facility have restricted beds that are inadvertently certified, the facility will be allowed to apply for a Certificate of Need to convert these beds to general nursing home beds, regardless of the projected bed need for that county.

The Nursing Home Inventory and Bed Need Chart are located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria are considered the most important in evaluating Certificate of Need applications for these beds or facilities:

1. Community Need Documentation;
2. Distribution (accessibility);
3. Staff Resources; and
4. Record of the Applicant

Because nursing homes are located within approximately 30 minutes travel time for the majority of the residents of the State and at least one nursing home is located in every county, no justification exists for approving additional nursing homes or beds that are not indicated as needed in this Plan. The major accessibility problem is caused by the lack of Medicaid funding since the Medicaid Program pays for approximately 65% of all nursing home residents. This Plan projects the need for nursing home beds by county. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for this service.

MEDICAID NURSING HOME PERMITS

The Medicaid Nursing Home Permit Act, formerly known as the Nursing Home Licensing Act of 1987, sets forth a regulatory scheme whereby Medicaid nursing home permits and Medicaid patient days are allocated in South Carolina. A long-term care facility (nursing home) must obtain a Medicaid nursing home permit from the Department in order to serve Medicaid patients. A Medicaid patient is a person who is eligible for Medicaid (Title XIX) sponsored long-term care services. In the annual appropriations act, the South Carolina General Assembly establishes the maximum number of Medicaid patient days the Department is authorized to issue. A Medicaid patient day is a day of nursing home care for which the holder of a Medicaid nursing home permit can receive Medicaid reimbursement. The South Carolina Department of Health and Human Services provides the number of Medicaid patient days available to the Department within thirty (30) days after the effective date of the annual appropriations act.

The Medicaid Patient Days and Medicaid Beds Requested & Authorized Chart is located at the end of this Chapter.

INSTITUTIONAL NURSING HOME (RETIREMENT COMMUNITY NURSING HOME)

An institutional nursing home means a nursing facility {established within the jurisdiction of a larger non-medical institution) that maintains and operates organized facilities and services to accommodate only residents of the institution. These facilities provide necessary services for retirement communities as established by church, fraternal, or other organizations. Such beds must serve only the residents of the housing complex and either be developed after the housing has been established or be developed as a part of a total housing construction program that has documented that the entire complex is one inseparable project.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

To be considered under this special bed category, the following criteria must be met:

1. The nursing home must be a part of and located on the campus of the retirement community.
2. It must restrict admissions to campus residents.
3. The facility may not participate in the Medicaid program.

There is no projection of need for this bed category. The applicant must demonstrate that the proposed number of beds is justified and that the facility meets the above qualifications. If approved by the Department, such a facility would be licensed as an "Institutional Nursing Home" and the beds generated by such a project will be placed in the statewide inventory at the end of this Chapter. These beds are not counted against the projected need of the county where the facility is located. For established retirement communities, a generally accepted ratio of nursing home beds to retirement beds is 1:4.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria are considered the most important in evaluating Certificate of Need applications for these beds or facilities:

1. Community Need Documentation;
2. Acceptability; and

3. Record of the Applicant.

Because Institutional Nursing Home Beds are used solely by the residents of the retirement community, there is no justification for approving this type of nursing home unless the need can be documented by the retirement center. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for these beds or facilities.

SWING-BEDS

A Certificate of Need is not required to participate in the Swing Bed Program in South Carolina;
However, the hospital must obtain Medicare certification.

The Social Security Act (Section 1883(a)(1), [42 U.S.C. 1395tt]) permits certain small, rural hospitals to enter into a swing bed agreement, under which the hospital can use its beds to provide either acute or Skilled Nursing Facility (SNF) care, as needed. The hospital must be located in a rural area and have fewer than 100 beds.

Medicare Part A covers the services furnished in a swing bed hospital under the SNF Prospective Payment System (PPS). The PPS classifies residents into one of 44 categories for payment purposes. To qualify for SNF-level services, a beneficiary is required to receive acute care as a hospital inpatient for a stay of at least three consecutive days, although it does not have to be from the same hospital as the swing bed. Typical medical criteria include daily physical, occupational and/or speech therapy, IV or nutritional therapy, complex wound treatment, pain management, palliative care, and end-of-life care.

The Swing-Bed Participants Chart is located at the end of this Chapter.

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Region I	# Beds
Abbeville	
Abbeville Nursing Home	94
Anderson	
Brookdale Anderson	44
Condor Health - Anderson 1	181
Iva Post Acute 2	60
Linley Post Acute 3	88
NHC HealthCare Anderson	290
Richard M. Campbell Veterans Nursing Home	220
Piedmont Post Acute 4	88
Cherokee	
Blue Ridge in Brookview House	132
Peachtree Centre 5	151
Greenville	
Arboretum at the Woodlands	30
Brushy Creek Post Acute	144
Carlyle Senior Care of Fountain Inn	60
Gables on Pelham Skilled Nursing and Rehab 6	45
Greenville Post Acute	132
Greer Post Acute 7	133
Linville Courts at the Cascades Verdae	44
Magnolia Manor - Greenville	99
NHC HealthCare Greenville	176
NHC HealthCare Mauldin	180
Patewood Post Acute 8	120
Prisma Health Greenville Memorial Subacute	15
Promedica Skilled Nursing and Rehabilitation Greenville East 9	132
Promedica Skilled Nursing and Rehabilitation Greenville West 10	125
River Falls Post Acute 11	44
Rolling Green Village Health Care Facility	74
Simpsonville Post Acute 12	132
Southpointe Healthcare and Rehabilitation	120
West Village Post Acute 13	132
Greenwood	
Greenwood Transitional Rehabilitation Unit	12
Magnolia Manor - Greenwood	88
NHC HealthCare Greenwood	152
Wesley Commons Health and Rehabilitation Center	80

LONG-TERM CARE INVENTORY
(Chapter 3)

Laurens

Martha Franks Baptist Retirement Community	88
NHC HealthCare Clinton	131
NHC HealthCare Laurens	176
Presbyterian Communities of SC - Clinton (48 institutional beds)	64

McCormick

McCormick Rehabilitation and Healthcare Center	120
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Oconee

Prisma Health Lila Doyle	120
Seneca Health and Rehabilitation Center	132

Pickens

Capstone Rehabilitation and Healthcare Center	60
Clemson Area Retirement Center - Health Care Center	68
Easley Place 14	60
Fleetwood Rehabilitation and Healthcare Center	103
Manna Rehabilitation and Healthcare Center	130
Presbyterian Communities of South Carolina - Foothills	44
PruittHealth - Pickens	44

Spartanburg

Golden Age Operations	44
Inman Operations	40
Lake Emory Post Acute Care	88
Magnolia Manor - Inman	176
Magnolia Manor - Spartanburg	95
Mountainview Nursing Home	132
Physical Rehabilitation & Wellness Center of Spartanburg	120
Rosecrest Rehabilitation and Healthcare	75
Skylyn Nursing and Rehabilitation Center	44
Spartanburg Hospital for Restorative Care SNF	25
Summit Hills Skilled Nursing Facility	33
Valley Falls Terrace	88
White Oak at North Grove	132
White Oak Estates	88
White Oak Manor Spartanburg 15	100
Woodruff Manor	88

Union

Ellen Sagar Nursing Center	113
Promedica Skilled Nursing and Rehabilitation - Union	88

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Region II

Aiken

Anchor Post Acute 16	120
Carlyle Senior Care of Aiken	86
NHC HealthCare North Augusta	192
Place at Pepper Hill	125
PruittHealth - Aiken	176
PruittHealth - North Augusta	132

Barnwell

Blackville Healthcare and Rehab	85
PruittHealth - Barnwell	44
Williston Healthcare and Rehab	44

Chester

MUSC Health Chester Nursing Center	80
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Edgefield

Edgefield Post Acute 17	120
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Fairfield

PruittHealth - Ridgeway	150
Ridgeway Manor Healthcare Center	112

Kershaw

KershawHealth Karesh Long Term Care 18	132
Springdale Healthcare Center	148

Lancaster

Lancaster Health and Rehabilitation	142
MUSC Health Lancaster Nursing Center	14
White Oak Manor Lancaster	132

Lexington

Brian Center of Nursing Care - St. Andrews	108
Heritage at Lowman Rehabilitation & Healthcare	176
Laurel Crest Retirement Community 19	12
Lexington Medical Center Extended Care	388
Millennium Post Acute Rehabilitation	132
NHC HealthCare Lexington	170
Opus Post Acute Rehabilitation	98
Presbyterian Communities of South Carolina - Columbia 20	44
Retreat at Wellmore of Lexington	60
South Carolina Episcopal Home at Still Hope	70

Newberry

JF Hawkins Nursing Home	118
White Oak Manor Newberry	146

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Richland

CM Tucker Jr. Nursing Center Fewell & Stone Pavilions	252
CM Tucker Jr. Nursing Center Roddey Pavilion	308
Life Care Center of Columbia	179
Midlands Health & Rehabilitation Center	88
NHC HealthCare Parklane	180
Promedica Skilled Nursing and Rehabilitation - Columbia 21	132
PruittHealth - Blythewood	120
PruittHealth - Columbia	150
Rice Estate Rehabilitation and Healthcare	80
Sedgewood Manor Health Care Center	38
White Oak Manor Columbia	120
Wildewood Downs Nursing and Rehabilitation Center	80

Saluda

Saluda Nursing Center	176
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York

Lodge at Wellmore	60
Magnolia Manor - Rock Hill	106
PruittHealth Rock Hill	132
Rock Hill Post Acute Care Center	99
Westminster Health and Rehabilitation Center	66
White Oak Manor York	109
White Oak of Rock Hill	141
Willow Brook Court at Park Pointe Village	40

Region III

Chesterfield

Cheraw Healthcare	120
Rehab Center of Cheraw	104

Clarendon

Lake Marion Nursing Facility	88
Windsor Manor Nursing Home 22	88

Darlington

Betha Baptist Health Care Center 23	88
Medford Nursing Center	88
Morrell Nursing Center	154
Oakhaven Nursing Center	88

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Dillon

Carlyle Senior Care of Fork	111
PruittHealth Dillon	84

Florence

Carlyle Senior Care of Florence	88
Commander Nursing Center	163
Faith Healthcare Center	104
Heritage Home of Florence	132
Honorage Nursing Center	88
Lake City-Scranton Healthcare Center	88
Methodist Manor Healthcare Center	32
Presbyterian Communities of South Carolina - Florence	44
Southland Health Care Center	88

Georgetown

Blue Ridge in Georgetown	84
Lakes at Litchfield Skilled Nursing Center	24
Prince George Healthcare Center	148

Horry

Angel Oak Nursing and Rehabilitation Center 24	88
Brightwater Skilled Nursing Center	67
Compass Post Acute Rehabilitation	95
Conway Manor	190
Loris Rehab and Nursing Center	88
Myrtle Beach Manor	60
NHC HealthCare Garden City	148
PruittHealth Conway at Conway Medical Center	88

Lee

McCoy Memorial Nursing Center	120
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Marion

MUSC Health Mullins Nursing Center	92
Senior Care of Marion	95

Marlboro

Dundee Manor	110
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Sumter

Blue Ridge of Sumter	96
Covenant Place Nursing Center (16 institutional beds)	44
NHC HealthCare Sumter	138
Sumter East Health and Rehabilitation Center	176

Williamsburg

Carlyle Senior Care of Kingstree	96
Dr. Ronald E McNair Nursing and Rehabilitation Center	88

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Region IV

Allendale	
John Edward Harter Nursing Center	44
Bamberg	
Pruitthealth - Bamberg	88
Beaufort	
Bayview Manor	170
Broad Creek Care Center Skilled Nursing	25
Fraser Health Care	33
Life Care Center of Hilton Head	88
NHC HealthCare Bluffton	120
Preston Health Center	77
Sprenger Healthcare of Bluffton	60
Sprenger Healthcare of Port Royal	65
Berkeley	
Viviant Healthcare of Hanahan 25	135
Lake Moultrie Nursing Home	88
PruittHealth - Moncks Corner	132
Retreat at Wellmore of Daniel Island	60
Calhoun	
Calhoun Convalescent Center	120
Charleston*	
Bishop Gadsden Episcopal Health Care Center 26	100
Franke Health Care Center	44
Viviant Healthcare of Charleston 27	125
Johns Island Post Acute	132
Life Care Center of Charleston	148
Mount Pleasant Manor	132
NHC HealthCare Charleston	132
Riverside Health and Rehab	160
Sandpiper Rehab & Nursing	176
Shem Creek Nursing and Rehab	40
White Oak Manor Charleston, Inc.	176
Colleton	
Pruitthealth - Walterboro	132
Veterans Victory House	220

**LONG-TERM CARE INVENTORY
(Chapter 3)**

Dorchester

Hallmark Healthcare Center	88
Oakbrook Health and Rehabilitation Center	88
Presbyterian Communities of South Carolina-Summerville	88
St. George Healthcare Center	88

Hampton

PruittHealth Estill	104
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Jasper

Ridgeland Nursing Center	88
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Orangeburg

Edisto Post Acute	113
Jolley Acres Healthcare Center	60
The Oaks Healthcare 28	122
PruittHealth - Orangeburg	88

Statewide Total

20,662

- 1** Formerly known as Ellenburg Nursing Center.
- 2** Formerly known as Iva Rehabilitation and Healthcare Center.
- 3** Formerly known as Linley Park Rehabilitation and Healthcare.
- 4** Formerly known as Southern Oaks Rehabilitation and Healthcare Center.
- 5** CON SC-20-28 issued on 7-15-2020 for the conversion of 40 assisted living beds to skilled nursing beds for a total of 151 skilled nursing beds.
- 6** Formerly known as Brookdale Greenville.

- 7** Formerly known as Greer Rehabilitation and Healthcare Center.
- 8** Formerly known as Patewood Rehabilitation and Healthcare Center.
- 9** Formerly known as Heartland Care Center - Greenville East.
- 10** Formerly known as Heartland Care Center - Greenville West.
- 11** Formerly known as River Falls Rehabilitation and Healthcare Center.
- 12** Formerly known as Simpsonville Rehabilitation and Healthcare Center.
- 13** Formerly known as Poinsett Rehabilitation and Healthcare Center.
- 14** Formerly known as Brookdale Easley.

LONG-TERM CARE INVENTORY

(Chapter 3)

- 15** CON SC-21-20 issued on 5/18/2021 for the construction of a new 65,000 sf nursing home for the replacement of the current White Oak Manor - Spartanburg Home and add the addition of 40 skilled nursing beds for a total of 100 skilled nursing beds.
- 16** Formerly known as Anchor Rehabilitation and Healthcare Center of Aiken.
- 17** Formerly known as Ridge Rehabilitation and Healthcare Center.
- 18** CON SC-20-39 issued on 9/16/2020 for the construction of a 87,690 sf facility for the replacement of the current facility and the addition of 36 skilled nursing beds for a total of 132 skilled nursing beds.
- 19** CON SC-19-103 issued September 12, 2019 for conversion of 12 Institutional Nursing beds to 12 Non-Institutional Nursing beds at a total project cost of \$50,000.
- 20** CON SC-20-15 issued 5/15/2020 for renovations with no additional bed count.
- 21** Formerly known as Heartland of Columbia Rehabilitation & Nursing Center.
- 22** CON SC-19-117 issued 12/10/2019 for the construction for the replacement of the current facility and the addition of 24 skilled nursing beds for a total of 88 skilled nursing beds.
- 23** CON SC-19-15 issued February 12, 2019 for construction of a 44,804 sf building for the replacement of an existing 88-bed skilled nursing facility, with no increase in beds.
- 24** Formerly known as Grand Strand Rehab and Nursing Center.
- 25** Formerly known as Heartland of West Ashley Rehabilitation & Nursing Center.
- 26** CON SC-19-23 issued April 10, 2019 for construction of a new health care facility that will offer a 100 bed health care center, which includes an additional 50 skilled nursing beds.
- 27** Formerly known as Heartland of West Ashley Rehabilitation & Nursing Center.
- 28** Formerly known as Methodest Oaks.

* Savannah Grace at the Palms of Mt. Pleasant closed on 2/25/2022. Forty-eight (48) beds removed from inventory.

*North Charleston Post Acute 12/21/2017 decision granting approval for the construction of a new 70 bed skilled nursing facility was under appeal. Applicant withdrew the application prior to court decision. Facility has been removed from inventory.

**LONG-TERM CARE BED NEED
(Chapter 3)**

Regions	2024 Population (Thousands)	Bed Need	2024 Population (Thousands)	Bed Need	Existing	Total #
	Age 65-74 Years	(Pop x 10)	Age 75+ Years	(Pop x 58)	Beds	Beds to be Added
Region I						
Abbeville	3.35	34	2.71	157	94	97
Anderson	23.66	237	18.41	1,068	971	334
Cherokee	6.24	62	4.64	269	283	48
Greenville	58.54	585	43.75	2,538	1,937	1,186
Greenwood	8.10	81	6.92	401	332	150
Laurens ¹	8.07	81	5.99	347	411	17
McCormick	2.01	20	1.72	100	120	0
Oconee	12.47	125	9.15	530	252	403
Pickens	13.56	136	10.95	635	509	262
Spartanburg	34.90	349	25.90	1,502	1,368	483
Union	3.50	35	2.52	146	201	(20)
Region I Total	174.41	1,744	132.65	7,694	6,478	2,960
Region II						
Aiken	22.57	226	17.50	1,015	831	410
Barnwell	2.49	25	1.87	108	173	(40)
Chester	3.83	38	2.80	163	80	121
Edgefield	3.40	34	2.79	162	120	76
Fairfield	3.48	35	2.32	135	262	(93)
Kershaw	8.53	85	6.21	360	280	166
Lancaster	14.33	143	12.79	742	288	597
Lexington	34.36	344	24.91	1,445	1,258	530
Newberry	4.85	49	3.77	219	264	3
Richland	39.01	390	26.77	1,553	1,727	216
Saluda	2.50	25	2.21	128	176	(23)
York	31.42	314	21.23	1,231	753	793
Region II Total	170.78	1,708	125.18	7,260	6,212	2,756
Region III						
Chesterfield	5.46	55	4.19	243	224	74
Clarendon	5.02	50	4.08	237	176	111
Darlington	8.02	80	6.17	358	418	20
Dillon	3.32	33	2.35	137	195	(25)
Florence	15.28	153	11.50	667	827	(7)
Georgetown	12.05	121	9.37	543	256	408
Horry	77.96	780	47.12	2,733	824	2,689
Lee	2.04	20	1.49	86	120	(13)
Marion	3.86	39	2.88	167	187	18
Marlboro	3.00	30	2.25	131	110	51
Sumter ²	11.47	115	8.61	499	438	176
Williamsburg	4.00	40	3.12	181	184	37
Region III Total	151.49	1,515	103.13	5,981	3,959	3,537
Region IV						
Allendale	1.04	10	0.83	48	44	14
Bamberg	1.82	18	1.53	89	88	19
Beaufort	35.45	354	30.44	1,766	638	1,482
Berkeley	25.61	256	17.50	1,015	415	856
Calhoun	2.08	21	1.76	102	120	3
Charleston	50.41	504	35.35	2,050	1,388	1,166
Colleton	4.86	49	3.43	199	352	(104)
Dorchester	17.72	177	12.21	708	352	533
Hampton	2.20	22	1.75	101	104	19
Jasper	5.83	58	3.53	205	88	175
Orangeburg	10.43	104	8.53	495	383	216
Region IV Total	157.44	1,574	116.86	6,778	3,972	4,380
Statewide Totals	654.13	6,541	478	27,714	20,621	13,634

¹ 48 institutional beds at Presbyterian Communities of SC - Clinton are not included in Laurens County inventory.
² 16 institutional beds at Covenant Place Nursing Center are not included in Sumter County inventory.

Medicaid Patient Days and Medicaid Beds Requested and Authorized:

Year	# Days Requested	Beds	# Days Authorized	Beds	# Days Difference
1988-1989	3,032,839	8,309	2,971,811	8,142	61,028
1989-1990	3,644,248	9,984	3,644,248	9,984	0
1990-1991	3,709,814	10,163	3,659,965	10,028	49,849
1991-1992	3,856,833	10,567	3,659,965	10,028	196,868
1992-1993	3,976,576	10,895	3,806,382	10,429	170,194
1993-1994	4,012,359	10,993	3,856,382	10,566	155,977
1994-1995	4,023,690	11,024	3,892,882	10,665	130,808
1995-1996	3,969,681	10,876	3,892,882	10,665	76,799
1996-1997	4,072,519	11,158	4,002,382	10,965	70,137
1997-1998	4,119,753	11,287	4,097,282	11,225	22,471
1998-1999	4,265,182	11,685	4,265,182	11,685	0
1999-2000	4,367,134	11,965	4,341,832	11,895	25,302
2000-2001	4,420,522	12,111	4,378,332	11,995	42,190
2001-2002	4,473,170	12,255	4,275,998	11,715	197,172
2002-2003	4,340,158	11,891	4,205,553	11,522	134,605
2003-2004	4,304,160	11,792	4,205,553	11,522	98,607
2004-2005	4,294,977	11,767	4,205,553	11,522	89,424
2005-2006	4,291,812	11,758	4,205,553	11,522	86,259
2006-2007	4,283,209	11,735	4,205,553	11,522	77,656
2007-2008	4,263,785	11,682	4,205,553	11,522	58,232
2008-2009	4,231,047	11,592	4,205,553	11,522	25,494
2009-2010	4,215,522	11,549	4,205,553	11,522	9,969
2010-2011	4,217,584	11,555	4,205,553	11,522	12,031
2011-2012	4,250,190	11,644	3,771,878	10,333	478,312
2012-2013	4,268,032	11,693	3,815,921	10,455	452,111
2013-2014	4,132,731	11,323	3,815,921	10,455	316,810
2014-2015	4,094,917	11,219	3,815,921	10,455	278,996
2015-2016	4,112,740	11,268	3,815,921	10,455	296,819
2016-2017	4,006,470	10,977	3,815,921	10,455	190,549
2017-2018	4,020,582	11,015	3,815,921	10,455	204,661
2018-2019	4,114,439	11,272	3,864,665	10,588	249,774
2019-2020	4,259,602	11,670	3,864,665	10,588	394,937
2020-2021	4,259,602	11,670	0 ¹	0	4,452,015
2021-2022	4,190,765	11,482	3,864,665	10,588	326,100
2022-2023	4,259,602	11,670	3,864,665	10,588	394,937

¹No new Medicaid Permits were issued for 2020-2021 in light of Executive Order 2020-11.

**SWING-BED PARTICIPANTS*
(Chapter 3)**

FACILITY	TOTAL BEDS	SWING BEDS	2021 ADMISSIONS	2021 PT DAYS	ADC
Abbeville Area Medical Center	25	25	101	1,115	3.05
Allendale County Hospital 1	25	25	NR	NR	#VALUE!
McLeod Health Cheraw	59	49	27	418	1.15
Edgefield County Healthcare 2	14	14	83	1,698	4.65
Hampton Regional Medical Center	32	10	10	246	0.67
McLeod Health Clarendon	81	18	26	308	0.84
McLeod Health Medial Center Dillon	79	40	27	205	
MUSC Health Marion Medical Center	124	10	0	0	0.00
McLeod Medical Center- Darlington 3	23	0	0	0	0.00
Newberry County Memorial Hospital	90	20	15	119	0.33
Union Medical Center	85	0	0	0	
Williamsburg Regional Hospital	25	10	26	492	1.35

* E-19-02 issued for the permanent closure of Fairfield Memorial Hospital effective December 2018. Fairfield Memorial removed from inventory.

1 No 2021 JAR completed

2 Formerly Edgefield county Hospital.

3 Facility issued license for decrease in general beds from 49 to 0 and a decrease in swing beds from 24 to 0. Effective 02/02/2021, facility is only licensed for 23 psychiatric beds.

CHAPTER4

HOME HEALTH AGENCIES

HOME HEALTH

Home Health Agencies

Home Health Agency means a public, nonprofit, or proprietary organization, whether owned or operated by one or more persons or legal entities, which furnishes or offers to furnish home health services. Home health services means those items and services furnished to an individual by a home health agency, or by others under arrangement with the home health agency, on a visiting basis and except for (d) below, in a place of temporary or permanent residence used as the individual's home as follows:

Part-time or intermittent skilled nursing care as ordered by a physician or an Advanced Practice Registered Nurse (APRN) or Physician Assistant (PA) and provided by or under the supervision of a registered nurse and at least one other therapeutic service listed below: (a) physical, occupational, or speech therapy; (b) medical social services, home health aide services, and other therapeutic services; (c) medical supplies as indicated in the treatment plan and the use of medical appliances, to include durable medical equipment and (d) any of the above items and services provided on an outpatient basis under arrangements made by the home health agency with a hospital, nursing home or rehabilitation center and the furnishing of which involves the use of equipment of such a nature that the items/services cannot readily be made available to the individual in his/her home, or which are furnished at one of the above facilities while the patient is there to receive such items or services. Transportation of the individual in connection with any such items or services is not included. For more specific details about home health agencies, refer to [Regulation 61-77](#) (*Standards for Licensing Home Health Agencies*).

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. An applicant must propose home health services to cover the geographic area of an entire county and agree to serve residents throughout the entire county.
2. An application is required for the counties identified by the applicant in which services are to be provided.
3. A new home health agency or expansion of an existing home health agency

may be approved if an applicant can demonstrate it will serve 50 or more patients projected to be in need in non-rural counties, or 25 or more patients projected to be in need in rural counties, through evidence that may include, but would not be limited to, the following:

- a. Letters of support that identify need for additional home health services from physicians and other referral sources.
 - b. Evidence of underutilization of home health services.
 - c. Evidence of limited scope home health agency service including skilled nursing, physical therapy, occupational therapy, speech therapy, home health aides, and medical social workers.
 - d. Evidence of the denial or delay in the provision of home health services, including but not limited to long waiting lists or delays which exceed industry standards.
 - e. Evidence that one or more existing home health agencies has failed to meet the minimum patient service requirements set forth in Standard 8 of this section of the Plan within two years of the initiation of patient services after receiving a home health license.
4. For the purposes of this Section, a rural county shall mean a county with a population of less than 50,000, according to the most recent projections of the South Carolina Revenue and Fiscal Affairs office as of the time the current Plan was adopted.
 5. All home health agency services (Skilled Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, Home Health Aide, and Medical Social Worker) should be available within a county. If there is no hospital in a county and the existing licensed home health agencies between them do not provide all of the services identified above, this may be cited as potential justification for the approval of an additional agency that intends to offer these services.
 6. Specialty home health providers are exempt from the need calculation applicable to full-service home health agencies, but are otherwise subject to Certificate of Need.
 7. The applicant should have a track record that demonstrates a commitment to quality services. There should be no history of prosecution, consent order,

abandonment of patients in other business operations, or loss of license. However, any consent orders or loss of licenses related to licenses that were obtained from the Department between July 1, 2013 and May 22, 2014 without a Certificate of Need shall not be grounds for denial of a Certificate of Need application pursuant to this Section. The applicant must provide a list of all licensed home health agencies it operates and the state(s) where it operates them.

8. The applicant must document that it can serve at least 25 patients annually in each rural county for which it is licensed and 50 patients annually in each non-rural county for which it is licensed within two years of initiation of services. The applicant must assure the Department that, should it fail to reach this threshold number two years after initiation of services in a county, it will voluntarily relinquish its license for that county.
9. Nothing in this Section is intended to restrict the ability of the Department to approve more than one new Home Health Agency in a county at any given time.

The Home Health Agency Inventory Chart is located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria, as outlined in Chapter 8 of Regulation 61-15, are considered to be the most important in reviewing Certificate of Need applications for this service:

1. Community Need Documentation;
2. Distribution (Accessibility); and
3. Medically Underserved Groups.

The benefits of improved accessibility outweigh the adverse effects caused by the duplication of any existing service.

Pediatric Home Health Agencies

Due to the limited number of home health providers available to treat children 18 years or younger, an exception to the above criteria may be made for a Certificate of Need for a Home Health Agency restricted to providing intermittent home health skilled nursing services to patients 18 years or younger. The license for the agency will be restricted to serving children 18 years or younger and will ensure access to necessary and appropriate intermittent home health skilled nursing services to these patients. Any such approved agency will not be counted in the county inventories for need projection purposes.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. An application is required for the counties identified by the applicant in which specialized service to pediatric patients are to be provided.
2. The applicant must document that there is an unmet need for this service in the county of application, and the agency will limit such services to the pediatric population 18 years or younger.
3. The applicant must document the full range of services that they intend to provide to pediatric patients.

Continuing Care Retirement Community Home Health Agencies

A licensed continuing care retirement community that also incorporates a skilled nursing facility may provide home health services and *does not require Certificate of Need review provided:*

- a. The continuing care retirement furnishes or offers to furnish home health services only to residents who reside in living units provided by the continuing care retirement community pursuant to a continuing care contract;
- b. The continuing care retirement community maintains a current license and meets the applicable home health agency licensing standards; and
- c. Residents of the continuing care retirement community may choose to obtain home health services from other licensed home health agencies.

Staff from other areas of the continuing care retirement community may deliver the home health services, but at no time may staffing levels in any area of the continuing care retirement community fall below minimum licensing standards or impair the services provided. If the continuing care retirement community includes charges for home health services in its base contract, it is prohibited from billing additional fees for those services. Continuing care retirement communities certified for Medicare or Medicaid, or both, must comply with government reimbursement requirements concerning charges for home health services. The continuing care retirement community shall not bill in excess of its costs. These costs will be determined on non-facility-based Medicare and/or Medicaid standards.

HOME HEALTH AGENCY INVENTORY

Region I

Facility by County

Abbeville County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF CLINTON
CENTERWELL HOME HEALTH-ANDERSON **7**
HEALTH RELATED HOME CARE
HOMECARE OF HOSPICECARE OF THE PIEDMONT **8**
HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-GREENWOOD
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH HOME HEALTH-UPSTATE **14**
PRUITTHEALTH @ HOME - COLUMBIA

Anderson County

ADVANCED NURSING SOLUTIONS **1**
AMEDISYS HOME HEALTH OF CLINTON
ANMED HEALTH HOME HEALTH AGENCY
BAYADA HOME HEALTH CARE-GREENVILLE
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
HEALTH RELATED HOME CARE
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH HOME HEALTH-UPSTATE
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
ST FRANCIS HOSPITAL HOME CARE
WELL CARE HOME HEALTH OF THE UPSTATE

Cherokee County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF CLINTON
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
CENTERWELL HOME HEALTH-UPSTATE **16**
INTERIM HEALTHCARE OF THE UPSTATE

INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
SPARTANBURG MEDICAL CENTER HOME HEALTH
WELL CARE HOME HEALTH OF THE UPSTATE

Greenville County

ADVANCED NURSING SOLUTIONS **1**
AMEDISYS HOME HEALTH OF CLINTON
BAYADA HOME HEALTH CARE-GREENVILLE
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
BRIGHTSTAR OF SPARTANBURG
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
HEALTH RELATED HOME CARE
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH HOME HEALTH-UPSTATE
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
ROLLING GREEN VILLAGE HOME HEALTH AGENCY (Serving continuing care retirement community at Rolling Green Village residents only)
SPARTANBURG MEDICAL CENTER HOME HEALTH
ST FRANCIS HOSPITAL HOME CARE
WELL CARE HOME HEALTH OF THE UPSTATE

Greenwood County

ADVANCED NURSING SOLUTIONS **4**
AMEDISYS HOME HEALTH OF CLINTON
CENTERWELL HOME HEALTH-ANDERSON **7**
HEALTH RELATED HOME CARE
HOMECARE OF HOSPICECARE OF THE PIEDMONT **8**
HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-GREENWOOD
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH HOME HEALTH-UPSTATE
PRUITTHEALTH @ HOME - COLUMBIA
WESLEY COMMONS HOME HEALTH CARE (Serving Campus Residents Only)

Laurens County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CLINTON
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
HEALTH RELATED HOME CARE
HOMECARE OF HOSPICECARE OF THE PIEDMONT **8**
HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care Retirement Community Campuses Only)
PRISMA HEALTH HOME HEALTH-UPSTATE **14**
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
WELL CARE HOME HEALTH OF THE UPSTATE

McCormick County

ADVANCED NURSING SOLUTIONS **4**
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH-ANDERSON **7**
HEALTH RELATED HOME CARE
HOMECARE OF HOSPICECARE OF THE PIEDMONT **8**
HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-GREENWOOD
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY

Oconee County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CLINTON
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
BRIGHTSTAR CARE OF PIEDMONT/EASLEY **17**
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
INTERIM HEALTHCARE OF THE UPSTATE **16**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRISMA HEALTH HOME HEALTH-UPSTATE
PRUITTHEALTH @ HOME - COLUMBIA
WELL CARE HOME HEALTH OF THE UPSTATE

Pickens County

ADVANCED NURSING SOLUTIONS **3**
AMEDISYS HOME HEALTH OF CLINTON
ANMED HEALTH HOME HEALTH AGENCY
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
BRIGHTSTAR CARE OF PIEDMONT/EASLEY **17**
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care
Retirement Community Campuses Only)
PRISMA HEALTH HOME HEALTH-UPSTATE
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
ST FRANCIS HOSPITAL HOME CARE
WELL CARE HOME HEALTH OF THE UPSTATE

Spartanburg County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CLINTON
BAYADA HOME HEALTH CARE-GREENVILLE **15**
BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only)
BRIGHTSTAR OF SPARTANBURG
CENTERWELL HOME HEALTH-ANDERSON **7**
CENTERWELL HOME HEALTH-GREENVILLE **15**
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LAURENS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH HOME HEALTH-UPSTATE **14**
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
SPARTANBURG MEDICAL CENTER HOME HEALTH
ST FRANCIS HOSPITAL HOME CARE
WELL CARE HOME HEALTH OF THE UPSTATE

Union County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CLINTON

BIOSCRIP INFUSION SERVICES (May Serve Pediatric Patients Only) **26**
INTERIM HEALTHCARE OF THE UPSTATE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-PIEDMONT
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - COLUMBIA
SPARTANBURG MEDICAL CENTER HOME HEALTH
WELL CARE HOME HEALTH OF THE UPSTATE

Region II

Facility by County

Aiken County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH-MIDLANDS **18**
ENHABIT HOME HEALTH AIKEN **19**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-AIKEN
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
TRINITY HOME HEALTH OF AIKEN
UNIVERSITY HOME HEALTH SERVICES **20**
WELL CARE HOME HEALTH OF THE MIDLANDS

Barnwell County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH-MIDLANDS **18**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-AIKEN
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
TRINITY HOME HEALTH OF AIKEN
VNA OF GREATER BAMBERG **21**

Chester County

ADVANCED NURSING SOLUTIONS **3**
BAYADA HOME HEALTH CARE-ROCK HILL **24**
BIOSCRIP INFUSION SERVICES **26**
CENTERWELL HOME HEALTH-MIDLANDS **18**
CENTERWELL HOME HEALTH-UPSTATE **16**

HOME CARE OF LANCASTER
INTERIM HEALTHCARE OF ROCK HILL
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY
NHC HOMECARE-PIEDMONT **25**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTHCARE
PROVIDENCE CARE AT HOME
PROVIDENCE HOME HEALTH, LLC **27**
PRUITTHEALTH @ HOME - COLUMBIA
WELL CARE HOME HEALTH OF THE UPSTATE

Edgefield County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH-MIDLANDS **18**
HEALTH RELATED HOME CARE
HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-AIKEN
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
TRINITY HOME HEALTH OF AIKEN
UNIVERSITY HOME HEALTH SERVICES **20**

Fairfield County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF CAMDEN
CENTERWELL HOME HEALTH-MIDLANDS **18**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-MIDLANDS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRECIOUS JEWELS MEDICAL AND HEALTH SERVICES, LLC **22**
PRUITTHEALTH @ HOME - COLUMBIA
WELL CARE HOME HEALTH OF THE MIDLANDS

Kershaw County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CAMDEN
CENTERWELL HOME HEALTH **23**
HOME CARE OF LANCASTER
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
MUSC HEALTH AT HOME KERSHAW **28**

NHC HOMECARE-MIDLANDS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - COLUMBIA
REANIMATIONS HOME HEALTH AGENCY **29**
WELL CARE HOME HEALTH OF THE MIDLANDS

Lancaster County

ADVANCED HOME HEALTH **31**
ADVANCED NURSING SOLUTIONS **3**
ATRIUM HEALTH AT HOME YORK (Previously HEALTHY @ HOME)
BAYADA HOME HEALTH CARE-ROCK HILL
BIOSCRIP INFUSION SERVICES **26**
BRIGHTSTAR CARE
CENTERWELL HOME HEALTH-MIDLANDS **18**
HOME CARE OF LANCASTER
INTERIM HEALTHCARE OF ROCK HILL
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY
NHC HOMECARE-PIEDMONT **25**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTHCARE
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
REANIMATIONS HOME HEALTH AGENCY **29**
WELL CARE HOME HEALTH OF THE UPSTATE

Lexington County

ADVANCED NURSING SOLUTIONS **1**
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF LEXINGTON
BAYADA HOME HEALTH CARE-GREENVILLE
BIOSCRIP INFUSION SERVICES **26**
CENTERWELL HOME HEALTH **23**
CENTERWELL HOME HEALTH-MIDLANDS **18**
ENHABIT HOME HEALTH AIKEN **19**
INTERIM HEALTHCARE OF THE UPSTATE **10**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
LAUREL CREST HOME HEALTH (May Serve Retirement Community Only)
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-MIDLANDS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care Retirement Community Campuses Only)
PRISMA HEALTH HOME HEALTH
PRUITTHEALTH @ HOME - COLUMBIA

STILL HOPES HOME HEALTH (Serving Campus Residents Only)

WELL CARE HOME HEALTH OF THE MIDLANDS

Newberry County

ADVANCED NURSING SOLUTIONS **6**

AMEDISYS HOME HEALTH OF CAMDEN

AMEDISYS HOME HEALTH OF LEXINGTON

BIOSCRIP INFUSION SERVICES **26**

CENTERWELL HOME HEALTH-MIDLANDS **18**

HEALTH RELATED HOME CARE

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE

INTERIM HEALTHCARE OF THE UPSTATE **9**

INTRAMED PLUS (Limited to home infusion nursing services) **12**

MEDICAL SERVICES OF AMERICA HOME HEALTH

NHC HOMECARE-GREENWOOD

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRISMA HEALTH HOME HEALTH-UPSTATE **14**

PRUITTHEALTH @ HOME - COLUMBIA

WELL CARE HOME HEALTH OF THE MIDLANDS

Richland County

ADVANCED NURSING SOLUTIONS **1**

AMEDISYS HOME HEALTH OF CAMDEN

AMEDISYS HOME HEALTH OF LEXINGTON

BAYADA HOME HEALTH CARE-GREENVILLE

BIOSCRIP INFUSION SERVICES **26**

CENTERWELL HOME HEALTH-MIDLANDS **18**

FIRST PRIORITY HOME HEALTH CARE

INTERIM HEALTHCARE OF THE UPSTATE **10**

INTRAMED PLUS (Limited to home infusion nursing services) **12**

MEDICAL SERVICES OF AMERICA HOME HEALTH

NHC HOMECARE-MIDLANDS

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care

Retirement Community Campuses Only) **30**

PRISMA HEALTH HOME HEALTH

PROVIDENCE HOME HEALTH

PRUITTHEALTH @ HOME - COLUMBIA

WELL CARE HOME HEALTH OF THE MIDLANDS

Saluda County

ADVANCED NURSING SOLUTIONS **5**

AMEDISYS HOME HEALTH OF LEXINGTON

CENTERWELL HOME HEALTH-MIDLANDS **18**

HEALTH RELATED HOME CARE

HOMECARE OF HOSPICECARE OF THE PIEDMONT (Terminally Ill Patients Only) **8**

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE

INTRAMED PLUS (Limited to home infusion nursing services) **12**

MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-GREENWOOD
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
WELL CARE HOME HEALTH OF THE MIDLANDS

York County

ADVANCED HOME HEALTH **31**
ADVANCED NURSING SOLUTIONS **3**
ATRIUM HEALTH AT HOME YORK (Previously HEALTHY @ HOME) **32**
BAYADA HOME HEALTH CARE-ROCK HILL
BIOSCRIP INFUSION SERVICES **26**
BRIGHTSTAR CARE
CENTERWELL HOME HEALTH-MIDLANDS **18**
CENTERWELL HOME HEALTH-UPSTATE **16**
EXCEL HOME CARE **33**
HOME CARE OF LANCASTER
INTERIM HEALTHCARE OF ROCK HILL
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY
NHC HOMECARE-PIEDMONT **25**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTHCARE
PROVIDENCE CARE AT HOME
PRUITTHEALTH @ HOME - COLUMBIA
WELL CARE HOME HEALTH OF THE UPSTATE
WESTMINSTER TOWERS HOME HEALTH (Serving Campus Residents Only)

Region III

Facility by County

Chesterfield County

ADVANCED NURSING SOLUTIONS **3**
AMEDYSIS HOME HEALTH OF CONWAY **35**
CENTERWELL HOME HEALTH-PEE DEE **34**
CHESTERFIELD VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
NHC HOMECARE-DARLINGTON **48**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE

Clarendon County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH CARE
CENTERWELL HOME HEALTH-PEE DEE **34**
COASTAL HEALTH LLC
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-LOW COUNTRY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH TUOMEY HOME HEALTH
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE MIDLANDS

Darlington County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF CONWAY
BETHEA HOME HEALTH (May Serve Retirement Community Only)
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-PEE DEE **34**
CHESTERFIELD VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
NHC HOMECARE-DARLINGTON **48**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE MIDLANDS

Dillon County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF CONWAY
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-PEE DEE **34**
COASTAL HEALTH LLC
FLORENCE VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
NHC HOMECARE-MURRELLS INLET
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE MIDLANDS

Florence County

ADVANCED NURSING SOLUTIONS **6**

AMEDISYS HOME HEALTH CARE
BAYADA HOME HEALTH CARE-GREENVILLE
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-PEE DEE **34**
COASTAL HEALTH LLC
FLORENCE VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
METHODIST MANOR HOME HEALTH (May Serve Retirement Community Only)
MUSC HEALTH AT HOME BY BAYADA - CONWAY **36**
NHC HOMECARE-DARLINGTON **48**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care Retirement Community Campuses Only)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE MIDLANDS

Georgetown County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH CARE
AMEDISYS HOME HEALTH OF GEORGETOWN
CENTERWELL HOME HEALTH-COASTAL **37**
CENTERWELL HOME HEALTH-PEE DEE **34**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
LIBERTY HOME CARE-MYRTLE BEACH
MEDICAL SERVICES OF AMERICA - COASTAL
MUSC HEALTH AT HOME BY BAYADA - CONWAY
NHC HOMECARE-MURRELLS INLET
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Horry County

ADVANCED NURSING SOLUTIONS **1**
AMEDISYS HOME HEALTH OF CONWAY
AMEDISYS HOME HEALTH OF MYRTLE BEACH
CENTERWELL HOME HEALTH-COASTAL **37**
CENTERWELL HOME HEALTH-PEE DEE **34**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
LIBERTY HOME CARE-MYRTLE BEACH
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
MUSC HEALTH AT HOME BY BAYADA - CONWAY
NHC HOMECARE-MURRELLS INLET
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Lee County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH-PEE DEE **34**
FLORENCE VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-DARLINGTON **48**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH TUOMEY HOME HEALTH
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE MIDLANDS

Marion County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF CONWAY
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-PEE DEE **35**
COASTAL HEALTH LLC
FLORENCE VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
MUSC HEALTH AT HOME BY BAYADA - CONWAY **36**
NHC HOMECARE-MURRELLS INLET
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Marlboro County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF CONWAY
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-PEE DEE **34**
CHESTERFIELD VISITING NURSES SERVICE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA - COASTAL
NHC HOMECARE-DARLINGTON **48**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE

Sumter County

ADVANCED NURSING SOLUTIONS **2**
AMEDISYS HOME HEALTH OF LEXINGTON
BAYADA HOME HEALTH CARE-GREENVILLE
CENTERWELL HOME HEALTH-PEE DEE **35**
COVENANT PLACE CCRC HOME HEALTH SERVICES (May Serve Retirement Community Only)
INTRAMED PLUS (Limited to home infusion nursing services) **12**
KINDRED AT HOME-PEE DEE
MCLEOD HOME HEALTH
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-MIDLANDS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRISMA HEALTH TUOMEY HOME HEALTH
PROVIDENCE HOME HEALTH
PRUITTHEALTH @ HOME - COLUMBIA **38**
PRUITTHEALTH @ HOME - FLORENCE **39**
WELL CARE HOME HEALTH OF THE MIDLANDS

Williamsburg County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH CARE
AMEDISYS HOME HEALTH OF GEORGETOWN
CAROLINAS HOME HEALTH
CENTERWELL HOME HEALTH-COASTAL **37**
CENTERWELL HOME HEALTH-PEE DEE **34**
COASTAL HEALTH LLC
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
MEDICAL SERVICES OF AMERICA - COASTAL
NHC HOMECARE-LOW COUNTRY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC(Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - FLORENCE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Region IV

Facility by County

Allendale County

ADVANCED NURSING SOLUTIONS **6**
AMEDISYS HOME HEALTH OF BLUFFTON
AMEDISYS HOME HEALTH OF CHARLESTON EAST
CENTERWELL HOME HEALTH-LOW COUNTRY **40**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
MEDICAL SERVICES OF AMERICA HOME HEALTH

NHC HOMECARE-AIKEN

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRUITTHEALTH @ HOME - LOW COUNTRY

VNA OF GREATER BAMBERG **21**

Bamberg County

ADVANCED NURSING SOLUTIONS **5**

AMEDISYS HOME HEALTH OF LEXINGTON

CENTERWELL HOME HEALTH-LOW COUNTRY **40**

GROVE PARK PHARMACY HOME CARE **41**

HOMECARE OF THE REGIONAL MEDICAL CENTER

INTRAMED PLUS (Limited to home infusion nursing services) **12**

INTREPID USA HEALTHCARE SERVICES

MEDICAL SERVICES OF AMERICA HOME HEALTH

NHC HOMECARE-LOW COUNTRY

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRUITTHEALTH @ HOME - LOW COUNTRY

VNA OF GREATER BAMBERG **21**

Beaufort County

ADVANCED NURSING SOLUTIONS **2**

AMEDISYS HOME HEALTH OF BEAUFORT **42**

AMEDISYS HOME HEALTH OF BLUFFTON

BEAUFORT MEMORIAL HOME HEALTH CARE-AMEDISYS PARTNER **42**

BRIGHTSTAR CARE-BLUFFTON

CENTERWELL HOME HEALTH-LOW COUNTRY **40**

CYPRESS CLUB HOME HEALTH AGENCY (May Serve Retirement Community Only)

ENHABIT HOME HEALTH BLUFFTON **43**

INTERIM HEALTHCARE

INTERIM HEALTHCARE OF THE UPSTATE **11**

INTRAMED PLUS (Limited to home infusion nursing services) **12**

INTREPID USA HEALTHCARE SERVICES **44**

ISLAND HEALTH CARE

MEDICAL SERVICES OF AMERICA HOME HEALTH

MUSC HEALTH AT HOME BY BAYADA

NHC HOMECARE-BEAUFORT

OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**

PALLIATIVE CARE OF THE LOWCOUNTRY (Restricted to Terminally Ill Residents)

PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)

PRUITTHEALTH @ HOME - LOW COUNTRY

SEABROOK WELLNESS AND HOME HEALTH CARE (Serving Retirement Campus Residents Only)

WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Berkeley County

ADVANCED NURSING SOLUTIONS **2**

AMEDISYS HOME HEALTH OF CHARLESTON

AMEDISYS HOME HEALTH OF CHARLESTON EAST

CENTERWELL HOME HEALTH-LOW COUNTRY **40**
CONTINUUM PEDIATRIC NURSING
INTERIM HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
KIDSCARE HOME HEALTH OF SOUTH CAROLINA **45**
MEDICAL SERVICES OF AMERICA - COASTAL
MUSC HEALTH AT HOME BY BAYADA-CHARLESTON
NHC HOMECARE-LOW COUNTRY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTH
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care
Retirement Community Campuses Only)
PRUITTHEALTH @ HOME - LOW COUNTRY
ROPER-ST FRANCIS HOME HEALTH CARE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Calhoun County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH **23**
GROVE PARK PHARMACY HOME CARE **41**
HOMECARE OF THE REGIONAL MEDICAL CENTER
INTERIM HEALTHCARE OF THE UPSTATE **10**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-MIDLANDS
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - COLUMBIA
VNA OF GREATER BAMBERG
WELL CARE HOME HEALTH OF THE MIDLANDS

Charleston County

ADVANCED NURSING SOLUTIONS **1**
AMEDISYS HOME HEALTH OF CHARLESTON
AMEDISYS HOME HEALTH OF CHARLESTON EAST
BRIGHTSTAR CARE OF CHARLESTON
CENTERWELL HOME HEALTH-LOW COUNTRY **40**
CONTINUUM PEDIATRIC NURSING
INTERIM HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
KIDSCARE HOME HEALTH OF SOUTH CAROLINA **45**
MEDICAL SERVICES OF AMERICA - COASTAL
MUSC HEALTH AT HOME BY BAYADA-CHARLESTON

NHC HOMECARE-LOW COUNTRY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) 13
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTH
PRUITTHEALTH @ HOME - LOW COUNTRY
ROPER-ST FRANCIS HOME HEALTH CARE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Colleton County

ADVANCED NURSING SOLUTIONS 6
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF CHARLESTON EAST
CENTERWELL HOME HEALTH-LOW COUNTRY 40
INTRAMED PLUS (Limited to home infusion nursing services) 12
INTREPID USA HEALTHCARE SERVICES
MEDICAL SERVICES OF AMERICA HOME HEALTH
MUSC HEALTH AT HOME BY BAYADA
NHC HOMECARE-BEAUFORT
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) 13
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
VNA OF GREATER BAMBERG 21
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Dorchester County

ADVANCED NURSING SOLUTIONS 2
AMEDISYS HOME HEALTH OF CHARLESTON
AMEDISYS HOME HEALTH OF CHARLESTON EAST
CENTERWELL HOME HEALTH-LOWCOUNTRY 40
CONTINUUM PEDIATRIC NURSING
INTERIM HEALTHCARE
INTRAMED PLUS (Limited to home infusion nursing services) 12
INTREPID USA HEALTHCARE SERVICES
KIDSCARE HOME HEALTH OF SOUTH CAROLINA 45
MEDICAL SERVICES OF AMERICA HOME HEALTH
MUSC HEALTH AT HOME BY BAYADA-CHARLESTON
NHC HOMECARE-LOW COUNTRY
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) 13
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PHC HOME HEALTH
PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY (Serving Continuing Care Retirement Community Campuses Only)
PRUITTHEALTH @ HOME - LOW COUNTRY
QUALITY OF LIFECARE, LLC 46
ROPER-ST FRANCIS HOME HEALTH CARE
WELL CARE HOME HEALTH OF THE LOWCOUNTRY

Hampton County

ADVANCED NURSING SOLUTIONS 5
AMEDISYS HOME HEALTH OF BLUFFTON

AMEDISYS HOME HEALTH OF CHARLESTON EAST
CENTERWELL HOME HEALTH-LOW COUNTRY **40**
INTERIM HEALTHCARE OF THE UPSTATE **11**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES **44**
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-BEAUFORT
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
VNA OF GREATER BAMBERG **21**

Jasper County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF BEAUFORT **43**
AMEDISYS HOME HEALTH OF BLUFFTON
BEAUFORT MEMORIAL HOME HEALTH CARE-AMEDISYS PARTNER **43**
BRIGHTSTAR CARE-BLUFFTON
CENTERWELL HOME HEALTH-LOW COUNTRY **41**
ENHABIT HOME HEALTH BLUFFTON
INTERIM HEALTHCARE OF THE UPSTATE **11**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
ISLAND HEALTH CARE
MEDICAL SERVICES OF AMERICA HOME HEALTH
NHC HOMECARE-BEAUFORT
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (Obstetric Patients Only) **13**
PALLIATIVE CARE OF THE LOWCOUNTRY (Restricted to Terminally Ill Residents)
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY

Orangeburg County

ADVANCED NURSING SOLUTIONS **5**
AMEDISYS HOME HEALTH OF CAMDEN
AMEDISYS HOME HEALTH OF LEXINGTON
CENTERWELL HOME HEALTH **23**
GROVE PARK PHARMACY HOME CARE **41**
HOMECARE OF THE REGIONAL MEDICAL CENTER
INTERIM HEALTHCARE OF THE UPSTATE **10**
INTRAMED PLUS (Limited to home infusion nursing services) **12**
INTREPID USA HEALTHCARE SERVICES
MEDICAL SERVICES OF AMERICA HOME HEALTH
MUSC HEALTH AT HOME BY BAYADA
NHC HOMECARE-AIKEN
OAKS HOME HEALTH (May ServeCampus Residents Only) **47**
OPTUM WOMEN'S AND CHILDREN'S HEALTH LLC (May Serve Obstetric Patients Only) **13**
PALMETTO INFUSION SERVICES (Limited to Home Infusion Nursing Services)
PRUITTHEALTH @ HOME - LOW COUNTRY
VNA OF GREATER BAMBERG **21**

WELL CARE HOME HEALTH OF THE MIDLANDS

- 1** Advanced Nursing Solutions licensed 4/26/2021, CON issued 4/30/2021
- 2** Advanced Nursing Solutions licensed 7/28/2021, CON issued 9/15/2021
- 3** Advanced Nursing Solutions licensed 10/13/2021, CON issued 9/15/2021
- 4** Advanced Nursing Solutions licensed 12/10/2021, CON issued 12/7/2021
- 5** Advanced Nursing Solutions licensed 6/20/2022, CON issued 4/27/2022
- 6** Advanced Nursing Solutions licensed 09/22/2022, CON issued 6/23/2022
- 7** Effective 9/1/2022, name changed from Kindred at Home-Anderson to Centerwell Home Health-Anderson
- 8** Effective 7/14/2021, agency inactive
- 9** Interim Healthcare of the Upstate licensed 10/6/2021, CON issued 8/30/2021
- 10** Interim Healthcare of the Upstate licensed 11/8/2021, CON issued 11/1/2021
- 11** Interim Healthcare of the Upstate CON issued 9/15/2022; not licensed
- 12** Licensed 12/11/2020, CON issued 10/12/2020
- 13** Effective 3/15/2022, name changed from Optum Women's and Children's Health-Piedmont to Optum Women's and Children's Health, LLC
- 14** Prisma Health Home Health Agency CON issued 10/16/2020
- 15** Effective 9/1/2022, name changed from Kindred at Home-Greenville to Centerwell Home Health-Greenville
- 16** Effective 9/1/2022, name changed from Kindred at Home-Upstate to Centerwell Home Health-Upstate
- 17** CON issued 9/17/2021; agency closed as of 12/30/2022
- 18** Effective 9/1/2022, name changed from Kindred at Home-Midlands to Centerwell Home Health-Midlands
- 19** Effective 2/3/2022, name changed from Encompass Health Home Health Aiken to Enhabit Home Health Aiken
- 20** Effective 11/8/2021, name changed from University Home Health North Augusta to University Home Health Services
- 21** Effective 3/31/2022, agency closed
- 22** Effective 9/3/2021 agency licensed, CON issued 5/18/2021
- 23** Effective 10/7/2022, name changed from Kindred at Home to Centerwell Home Health
- 24** Effective 9/30/2020, agency licensed
- 25** Effective 7/15/2021, agency closed
- 26** Effective 10/18/2022 agency licensed, CON issued 10/4/2022
- 27** Chester County office no longer licensed
- 28** Effective 8/1/2021, name changed from KershawHealth Home Health to MUSC Health at Home Kershaw
- 29** Effective 4/8/2022 agency licensed, CON issued 8/30/2021
- 30** Effective 2/28/2020 exemption granted for closure of Richland County agency only

- 31** Effective 3/1/2020, name changed from Advanced Home Care to Advanced Home Health

- 32** Effective 4/1/2020 name changed from Healthy @ Home to Atrium Health at Home York
- 33** Effective 10/6/2021 agency licensed, CON issued 8/30/2021

- 34** Effective 10/7/2022, name changed from Kindred at Home-Pee Dee to Centerwell Home Health-Pee Dee
- 35** CON issued 8/17/2022; not licensed
- 36** Effective 4/6/2021 license issued for counties
- 37** Effective 9/1/2022, name changed from Kindred at Home-Coastal to Centerwell Home Health-Coastal
- 38** Effective 10/31/2022, county removed from license
- 39** Effective 10/31/2022, county added to license
- 40** Effective 9/1/2022, name changed from Kindred at Home-Low Country to Centerwell Home Health-Low Country
- 41** CON issued 9/15/2022; not licensed
- 42** Effective 9/7/2022, change in ownership completed and name changed from Amedisys Home Health of Beaufort to Beaufort Memorial Home Health Care-An Amedisys Partner
- 43** Effective 2/3/2022, name changed from Encompass Health Home Health Bluffton to Enhabit Home Health Bluffton
- 44** Effective 11/4/2021 agency licensed, CON issued 2/11/2021
- 45** Effective 5/11/2022 agency licensed, CON issued 12/3/2021
- 46** CON issued 8/17/2022; not licensed
- 47** Effective 1/31/2022, agency closed
- 48** CON issued 10/30/2017 and withdrawn on 4/13/2020

CHAPTER 5

HOSPITALS

GENERAL HOSPITALS

Hospital

Hospital means a facility that is organized and administered to provide overnight medical or surgical care or nursing care for an illness, injury, or infirmity and must provide on-campus emergency services; that may provide obstetrical care; and in which all diagnoses, treatment, or care is administered by or under the direction of persons currently licensed to practice medicine, surgery, or osteopathy.

Hospital may include a residential treatment facility for children, adolescents, or young adults in need of mental health treatment that is physically a part of a licensed psychiatric hospital. This definition does not include facilities that are licensed by the Department of Social Services. A residential treatment facility for children, adolescents, or young adults in need of mental health treatment that is physically part of a licensed psychiatric hospital is not required to provide on-campus emergency services.

Hospital Bed

A bed for an adult or child patient. Bassinets for the newborn in a maternity unit nursery, beds in labor rooms, recovery rooms, and other beds used exclusively for emergency purposes are not included in this definition.

Bed Capacity

For existing beds, capacity is considered bed space designated exclusively for inpatient care, including space originally designed or remodeled for inpatient beds, even though temporarily not used for such purposes. The number of beds counted in any patient room is the maximum number for which adequate square footage is provided, except that single beds in single rooms have been counted even if the room contained inadequate square footage.

Inventory and Bed Need

All licensed general hospitals, including Federal facilities, and CON-approved general hospitals are listed in the inventory. Patient days and admissions are as reported by the hospital in its Joint Annual Report (JAR). The number of patient days utilized for the general hospital bed need calculations does not include days of care rendered in licensed psychiatric units, substance abuse units, or comprehensive rehabilitation units of hospitals. These days of care are shown in the corresponding inventories for each type of service. In addition, the days of care provided in Long-Term Care hospitals are not included in the general bed need calculations.

Total capacity by survey refers to a total designed capacity or maximum number of beds that may be accommodated as determined by an on-site survey. This capacity may exceed the number of beds actually set up and in use. It may also differ from the licensed capacity, which is based on State laws and regulations. Beds have been classified as conforming and nonconforming, according to standards of facility evaluation.

Variable Occupancy Rate

The General Acute Hospital bed need methodology uses the following variable occupancy rate factors:

0 - 174 bed hospitals → 65%
175 - 349 bed hospitals → 70%
350+ bed hospital → 75%

The population and associated utilization are broken down by age groups. The use rates and projected average daily census are made for the age cohorts of 0-17, 18-64, and 65 and over, in recognition that different population groups have different hospital utilization rates.

Where the term "hospital bed need" is used, these figures are based upon utilization data for the general acute hospitals. This term does not suggest that facilities cannot operate at higher occupancy rates than used in the calculations without adding additional beds.

Availability

The need for general hospital beds is determined through the consideration of current utilization and projected population growth with the goal of having beds available within approximately 30 minutes travel time for the majority of the residents of the State,

CERTIFICATE OF NEED PROJECTION AND STANDARDS

1. Calculations of hospital bed need are made for individual hospitals and for service areas.
2. For individual hospitals, the methodology for calculating bed need is as follows:
 - a. Determine the current facility use rate by dividing the 2021 patient days by the

2021 population in each of the three age cohorts.

- b. Multiply the current facility use rate for each age cohort by the projected population by age cohort and divide by 365 to obtain a projected average daily census (ADC) by age cohort.
 - c. Divide the sum of the age cohort projected ADC by the variable occupancy factor (.65/.70/.75) to determine the hospital's bed need.
 - d. The number of additional beds needed or excess beds for the hospital is obtained by subtracting the number of existing and approved beds from the hospital's bed need.
3. The methodology for calculating the statewide utilization bed need for a service area is as follows:
- a. Divide the statewide total patient days by 365 to determine the statewide average daily census.
 - b. Divide the statewide average daily census by the statewide occupancy factor (.75) to determine the total statewide bed need.
 - c. Divide the statewide bed need by the 2021 statewide population to generate a bed-per-population (BPP) multiplier.
 - d. For each service area, multiply the projected population by the BPP multiplier to determine the service area bed need, then subtract the total number of existing and approved beds to determine the statewide utilization bed need for the service area.
4. The bed need for each service area is the combined bed need for all individual hospitals in the service area. The bed need for service areas with no hospital, or for service areas in which no hospital has reported any utilization data on the most recent JAR, is the statewide utilization bed need.
5. If a service area indicates a surplus of beds, then no additional beds will be approved unless an individual hospital in the service area indicates a need for additional beds. Should an individual hospital indicate a need for additional beds, then a maximum of the actual projected bed need or up to 50 additional beds may be approved for that hospital to allow for the construction of an economical unit at either the existing hospital site or another site, if the existing hospital is relocating or has relocated in whole or in part to that site. The hospital requesting the addition must document the need for additional beds beyond those indicated as needed by the methodology

stated above, based on historical and projected utilization, as well as projected population growth or other factors demonstrating the need for the proposed beds. Additional beds will only be approved for the specific hospital indicating a need.

6. If there is a need for additional hospital beds in the service area, then any entity may apply to add these beds within the service area, and any entity may be awarded the Certificate of Need for these beds. If the number of beds needed is less than 50, then up to a total of 50 beds could be approved for any entity at any location within the service area. An applicant requesting additional beds beyond those indicated as needed by the methodology stated above must document the need for additional beds based on historical and projected utilization, projected population growth that has not been considered in this Plan or other factors demonstrating the need for the proposed beds. It is up to the applicant to document the need and the potential negative impact on the existing facilities.
7. A facility may apply to create a new additional hospital at a different site within the same service area through the transfer of existing licensed beds, the projected bed need for the facility, or a combination of both existing beds and projected bed need. The facility is not required to have a projected need for additional beds in order to create a new additional hospital. There is no required minimum number of beds in order to approve the CON application. The applicant must justify, through patient origin and other data, the need for a new hospital at the chosen site and the potential adverse impact a new hospital at the chosen site could have on the existing hospitals in the service area.
8. No additional general hospital will be approved unless it will provide:
 - a. A 24-hour emergency services department that meets the requirements of [Regulation 61-16](#);
 - b. Inpatient medical services to both surgical and non-surgical patients; and
 - c. Medical and surgical services on a daily basis within at least six of the major diagnostic categories as recognized by Centers for Medicare and Medicaid Services (CMS). Any applicant for a new hospital must provide a written commitment that the facility will accept Medicare and Medicaid patients and that unreimbursed services for indigent and charity patients are provided at a percentage that meets or exceeds other hospitals in the service area. The CMS Diagnostic Categories Chart is located at the end of this Chapter.
9. Due to the low utilization and the low capital cost of converting hospital-based nursing home, psychiatric, rehabilitation and/or substance abuse beds to general

acute care hospital beds, the following policies may apply:

- a. Hospitals that have licensed nursing home beds within the hospital may be allowed to convert nursing home beds to general acute care hospital beds only within the hospital, provided the hospital can document an actual need for additional general acute care beds. Need will be based on actual utilization, using current information. *A Certificate of Need is required for this conversion.*
 - b. Existing acute care hospitals that have inpatient psychiatric, rehabilitation, or substance abuse beds may be allowed to convert such beds to acute care hospital beds, regardless of the projected need for general acute care hospital beds. *A Certificate of Need is required for this conversion.*
10. In some areas of South Carolina, a considerable influx of tourists is not counted in the permanent population. If an individual hospital in these areas can document and demonstrate the need for additional beds due to non-resident (tourist) population and seasonal utilization fluctuations due to this population, then, based on further analysis, the Department may approve some additional beds at the existing hospital.
 11. Should the deletion of services at a federal facility result in an immediate impact on the utilization of a hospital, then the Department may approve a request for additional beds at the affected hospital. The affected hospital must document the increase in demand and explain why additional beds are needed to accommodate patients previously served at the federal facility.
 12. Changes in the delivery system due to health care reform have resulted in the consolidation of facilities and the establishment of provider networks. These consolidations and agreements may lead to situations where affiliated hospitals may wish to transfer beds between themselves in order to serve their patients in a more efficient manner. *A proposal to transfer or exchange hospital beds requires a Certificate of Need and must comply with the provisions outlined in Chapter 2, Transfer between Affiliated Facilities.*
 13. Factors to be considered regarding modernization of facilities include:
 - a. Functional arrangement of the facility as it relates to efficient handling of patients and related workloads.
 - b. The ability to update medical technology within the existing facility.
 - c. Existence of The Joint Commission (TJC) or other accreditation body

deficiencies or "grandfathered" licensure deficiencies.

d, Cost efficiency of the existing physical facility versus facility revision, etc.

e. Private rooms are now considered the industry standard.

14. Each modernization proposal must be evaluated on the basis of merit, cost efficiency, and impact on health care delivery within the service area.

The Hospital Bed Need Chart is located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following Project Review Criteria are considered to be the most important in evaluating Certificate of Need applications for this service:

1. Compliance with the Need Outlined in this Section of this Plan;
2. Community Need Documentation;
3. Distribution (Accessibility);
4. Acceptability;
5. Ability to Complete the Project; and
6. Adverse Effects on Other Facilities.

General hospital beds are typically located within approximately thirty (30) minutes travel time for the majority of the residents of the State. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for these beds.

LONG-TERM ACUTE CARE HOSPITALS

Long-Term Acute Care Hospitals (LTACHs) are hospitals with an average Medicare inpatient length of stay of greater than 25 days, including all covered and non-covered days of stay of Medicare patients. They provide treatment to patients with complex medical conditions, such as strokes, cardiac care, ventilator dependency, wound care and post-surgical care.

A LTACH may be either a freestanding facility or may occupy space in another hospital (“hospital-within-a-hospital”). Hospitals must meet additional federal criteria in order to qualify for a LTACH under the “hospital-within-a-hospital” model:

1. The new LTACH must have a governing body, which is separate from the governing body of the host hospital, and the new body cannot be under the control of the host hospital or any third entity that controls both hospitals.
2. The LTACH must have a separate Chief Executive Officer through whom all administrative authority flows, who is not employed by, or under contract with, the host hospital or any third entity that controls both hospitals.
3. The LTACH must have a separate Chief Medical Officer who reports directly to the governing body and is responsible for all medical staff activities. The Chief Medical Officer cannot be under contract with the host hospital or any third entity that controls both hospitals.
4. The LTACH must have a separate medical staff which reports directly to the governing body, and adopt bylaws governing medical care, including granting privileges to individual practitioners.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. An application for a LTACH must be in compliance with the relevant standards in Regulation 61-16 (*Minimum Standards for Licensing Hospitals and Institutional General Infirmaries*).
2. Although LTACH beds are not considered to be a separate category for licensing purposes, they will be inventoried separately from general acute care hospital beds for planning purposes.

3. The utilization of LTACHs is not included in the bed need for general acute care hospital beds. No bed need will be calculated for LTACH beds. An applicant must document the need for LTACH beds based on the utilization of existing LTACH beds.
4. A hospital that has leased general beds to a LTACH shall be entitled to regain these beds once the lease is terminated. No entity other than the hospital (or its successor) that initially leased the general acute beds to the LTACH shall be entitled to the beds upon termination of the lease. *A Certificate of Need application is required:*
 - a. A hospital may be allowed to convert these former LTACH beds to general acute hospital beds regardless of the projected need for general acute beds;
 - b. A hospital may be allowed to convert these former LTACH beds to psychiatric, inpatient treatment facility, rehabilitation, or other specialty beds only if there is a bed need projected for this proposed other category of licensed beds.
5. A hospital which seeks to be designated as a LTACH, and has been awarded a CON for that purpose, must be certified as a LTACH by CMS within 24 months of accepting its first patient, or the CON issued to that hospital for that purpose shall be revoked. The entity that has had its CON revoked shall not have the authority to operate as a general acute care hospital.
6. A hospital that desires to be designated as a Pediatric LTACH must restrict admissions to patients under the age of 21 who require long-term medical care. Should the facility attempt to provide care that is inconsistent with this requirement or patient demand or other economic conditions require the facility to close, the Certificate of Need issued to that hospital for that purpose shall be revoked.

The Long-Term Acute Care Hospitals Chart is located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria are considered to be the most important in evaluating Certificate of Need applications for this service:

1. Compliance with the Need Outlined in this Section of this Plan;
2. Community Need Documentation;
3. Distribution (Accessibility); and

4. Record of the Applicant.

Long-Term Acute Care Hospital beds are located within approximately 60 minutes travel time for the majority of the residents of the State. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for these beds.

COMMUNITY PSYCHIATRIC BEDS

Inpatient psychiatric services are those services provided to patients who are admitted to institutions for the evaluation, diagnosis and treatment of mental, emotional or behavioral disorders. Services may be provided in either psychiatric units of general hospitals or freestanding psychiatric hospitals.

Special units for children, adolescents and geriatric patients have been developed throughout the State. If any additional beds are approved, they must come from the calculated psychiatric bed need in this Plan. These specialty psychiatric services should be identifiable units with sufficient space to have available areas for sleeping, dining, education, recreation, occupational therapy and offices of evaluation and therapy. The unit should be staffed with an appropriate multi-disciplinary care team of psychiatrists, psychologists, social workers, nurses, occupational therapists, recreational therapists, and psychiatric technicians. Other consultants should be available as needed.

The Psychiatric Programs Chart is located at the end of this Chapter.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. Need projections are calculated on a statewide basis to serve the needs of this population.
2. The applicant must document the need for the expansion of or the addition of psychiatric services based on the most current utilization data available. The existing resources must be considered, and documentation presented as to why these resources are not adequate to meet the needs of the community.
3. The methodology for calculating psychiatric bed need is as follows:
 - a. The statewide utilization rate for psychiatric beds will be used for each age cohort.
 - b. Multiply the applicable utilization rate by the projected population for the year 2027 for each age cohort (where such data is available) and divide by 365 to obtain a projected average daily census by age cohort.
 - c. Take the sum of average daily censuses by age cohort and divide by the target occupancy rate of 50% to determine the number of beds needed in the statewide.
 - d. The number of additional beds needed or excess beds for the statewide is obtained by subtracting the number of existing beds from the bed need.
4. In the absence of a projected need for beds in a psychiatric service area, an existing facility can apply to add up to eight additional beds, given that it has achieved an occupancy rate of at least 70% as reported on the most recent Joint Annual Report (“JAR”) at the time the application is filed with the Department. Up to ten additional beds may be added in a facility which has achieved an occupancy rate of at least 90% as reported on the most recent JAR at the time the application is filed with the Department.

5. Priority should be given to excess general hospital beds that can be economically and cost effectively converted for use as a specialized psychiatric unit over the construction of new beds, if such beds will be accessible to the target.

The Psychiatric Bed Need Chart is located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria are considered to be the most important in evaluating Certificate of Need applications for this service:

1. Community Need Documentation;
2. Distribution (Accessibility);
3. Record of the Applicant; and
4. Staff Resources.

Psychiatric beds are planned for and located within 60 minutes travel time for the majority of the residents of the State. In addition, current utilization and population growth are factored into the methodology for determining psychiatric bed need. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for these services.

STATE MENTAL HEALTH FACILITIES

Psychiatric Hospital Beds

Department of Mental Health (DMH) operates a variety of psychiatric facilities. DMH has analyzed the patient population and plans to provide psychiatric services in the least restrictive environment, maintain patients in the community and keep hospitalization to a minimum. Since DMH cannot refuse any patient assigned to them by a court, renovation, replacement and expansion of the component programs should be allowed as long as the overall psychiatric hospital complement is maintained or reduced. As long as DMH does not add any additional beds over the 3,720 beds that were in existence on July 1, 1988, any changes in facility bed capacity would not require Certificate of Need review.

INPATIENT TREATMENT FACILITIES (SUBSTANCE ABUSE BEDS)

An inpatient treatment facility is a short-term treatment service for persons who are in need of an organized intensive program of alcohol and/or drug rehabilitation, but who are without serious debilitating medical complications. These facilities may provide detoxification for their patients, as needed, in the inpatient treatment beds. These facilities are licensed either as a specialized hospital or as part of a hospital. For reference purposes only, these facilities are subject to compliance with Regulation 61-16.

The Inpatient Treatment Facilities Chart is located at the end of this Chapter.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. Need projections are calculated by service area.
2. The methodology for calculating inpatient treatment bed need is as follows:
 - a. For the service area, take the greater of the service area utilization rate or the statewide utilization rate for inpatient treatment beds by age cohort. The statewide utilization rate for each age cohort will be used for those service areas where no beds currently exist.
 - b. Multiply the applicable utilization rate by the projected population for the year 2027 for each age cohort (where such data is available) and divide by 365 to obtain a projected average daily census by age cohort.
 - c. Take the sum of average daily censuses by age cohort and divide by the target occupancy rate of 75% to determine the number of beds needed in the service area.
 - d. The number of additional beds needed or excess beds for the service area is obtained by subtracting the number of existing beds from the bed need.
3. The significant prevalence of patients with mixed psychiatric/addictive etiologies presenting to hospitals with inpatient psychiatric beds, in the absence of a projected need statewide for inpatient treatment facility beds (substance abuse beds), a hospital or inpatient psychiatric facility without substance abuse beds may apply for a Certificate of Need to add up to eight (8) substance abuse beds if it can demonstrate need for the substance abuse beds at its facility, demonstrate an improvement in access to substance abuse beds statewide, and avoid materially adversely affecting existing inpatient treatment facilities.

4. In the absence of a projected need in the service area, an existing inpatient treatment facility can apply to add up to eight additional inpatient treatment beds if it has achieved an occupancy rate of at least 70% as reported on its most recent Joint Annual Report ("JAR") at the time the application is filed with the Department.
5. The establishment of a regional treatment center to serve more than a single service area may be proposed in order to improve access to care for patients in service areas that are not currently well served. Such a proposed center would be allowed to combine the bed need for separate, contiguous service areas, provided that each service area to be combined shows a positive bed need. The applicant must document with patient origin data the historical utilization of the residents in the service area that is to be combined, or why it is in the best interest of these residents for their projected bed need to be used to form a regional treatment facility.
6. It is frequently impossible for a facility to totally predict or control short-term deviation in the number of patients with mixed psychiatric/addictive etiology. Therefore, in the case of facilities with licensed beds for both psychiatric and substance abuse treatment, 75% of licensed substance abuse beds may be utilized alternatively for the treatment of patients having diagnoses of both psychiatric and substance abuse disorders.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following Project Review Criteria are considered to be the most important in evaluating Certificate of Need applications for this service.

1. Community Need Documentation
2. Distribution (Accessibility); and
3. Staff Resources

Services are accessible within 60 minutes travel time for the majority of residents of the state. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for this service.

The Inpatient Treatment Bed Need Chart is located at the end of this Chapter.

REHABILITATION FACILITIES (REHABILITATION BEDS)

A Rehabilitation Facility is operated for the primary purpose of providing comprehensive physical rehabilitation services through an intensive, coordinated team approach for patients with severe physical ailments. These facilities should be located where an extensive variety of professionals representing medical, psychological, social, and vocational rehabilitation evaluation and services are available. These beds are viewed as being comprehensive in nature and not limited only to a particular service or specialty. CMS identifies 13 specific conditions for which facilities must treat 60% of their patients ("the compliance threshold") in order to qualify for Medicare reimbursement. Certain comorbidities as specified in 42 CFR 412.29(b)(1) must be used to determine the compliance threshold.

Most general hospitals and other health care facilities offer physical rehabilitation services such as physical therapy, occupational therapy, speech therapy, or occupational therapy without the involvement of a formal interdisciplinary program. In addition, some hospitals have consolidated their rehabilitation services into a single unit to improve the coordination of care for

acute patients in their facilities. These consolidations are intended to improve the quality of care for patients currently being treated in the facility and are not considered to be providing comprehensive physical rehabilitation services as defined in this section of the Plan.

The Rehabilitation Programs Chart is located at the end of this Chapter.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. The need for beds is calculated based on rehabilitation service areas.
2. The methodology takes the greater of the actual utilization of the facilities in the service area or the statewide average number of beds per 1,000 of the 65+ population cohort to project need.
3. In the absence of a projected need for beds in a rehabilitation facility service area, an existing facility can apply to add up to eight additional beds, given that it has achieved an occupancy rate of at least 70% as reported on the most recent Joint Annual Report (“JAR”) at the time the application is filed with the Department. Up to ten additional beds may be added in a facility which has achieved an occupancy rate of at least 90% as reported on the most recent JAR at the time the application is filed with the Department.

The Rehabilitation Bed Need Chart is located at the end of this Chapter.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following project review criteria are considered to be the most important in evaluating Certificate of Need applications for this service:

1. Community Need Documentation;
2. Distribution (Accessibility); and
3. Ability to Complete the Project

Rehabilitation facilities are now located throughout the state and are available within approximately 60 minutes travel time for the majority of residents. Such facilities should be located where an extensive variety of health care professionals are available. The benefits of improved accessibility will be equally weighed with the adverse effects of duplication in evaluating Certificate of Need applications for this service.

Statewide Programs

The South Carolina Vocational Rehabilitation Center operates a 30-bed facility in West Columbia to serve the vocational training needs of the disabled.

CRITICAL ACCESS HOSPITALS (CAH)

The South Carolina Department of Health and Human Services administers programs through the Medicaid program to assist rural hospitals. One such program designates rural hospitals as Critical Access Hospitals (CAH) who are then eligible for more favorable Medicaid reimbursement methodology.

A CAH is intended to provide essential health services to rural communities. Converting a struggling rural hospital to a CAH can allow a community to maintain local health access that

would otherwise be lost. CAHs are subject to review by the Independent Payment Advisory Board (IPAB), whereas other hospitals are not currently subject to IPAB review.

The impact of the Critical Access Hospital Program in South Carolina is a financial one, allowing cost-based reimbursement from Medicare for a facility choosing to participate. The designation as a CAH does not require a change in the licensing of an existing hospital. However, a hospital may be required to de-license a number of beds in order to meet the 25-bed requirement.

The designation of a hospital as a Critical Access Hospital *does not require Certificate of Need review* because it does not change the licensing category of the facility. However, an exemption from Certificate of Need review is required for a hospital to reduce its number of licensed beds in order to meet the criteria for the CAH. *Should a hospital later desire to revert to a general acute hospital, a Certificate of Need is required*, but the facility may be permitted to increase the number of licensed hospital beds up to the prior number of beds without regard or affect to the current bed need shown in the service area.

The Critical Access Hospitals Chart is located at the end of this Chapter.

PERINATAL SERVICES

PERINATAL REGIONS

The Perinatal Regions referred to in the Neonatal Services sections below are distinct from the Department's Regions defined in Chapter 2 of this Plan, and are identified by the name of its designated Regional Perinatal Center.

Perinatal Region

Counties

I - Prisma Health Greenville Memorial

Abbeville, Anderson, Edgefield, Greenville, Greenwood,
Laurens, McCormick; Oconee, Pickens, Saluda

II - Spartanburg Regional

Cherokee, Chester, Spartanburg, Union

III - Prisma Health Richland

Aiken, Allendale, Bamberg, Barnwell, Calhoun, Clarendon,
Fairfield, Kershaw, Lancaster, Lee, Lexington, Newberry,
Orangeburg, Richland, Sumter, York

IV - Mcleod Regional

Chesterfield, Darlington, Dillon, Florence, Horry, Marion,
Marlboro, Williamsburg

V - MUSC Medical

Beaufort, Berkeley, Charleston, Colleton, Dorchester,
Hampton, Jasper, Georgetown

PERINATAL SERVICE LEVELS

Because the cost of high-risk obstetrical and neonatal services is so great, it is not desirable or cost-effective for all hospitals in the State to provide the higher levels of care. Over the years, a regionalized approach to perinatal care has been implemented in South Carolina to address the need for high quality, risk-appropriate, cost-effective perinatal health care. Regionalization provides a coordinated system of perinatal care for a well-defined population group. Each hospital providing perinatal services is designated by the Department's Bureau of Healthcare Systems and Services as a Level I, II, III, or IV Perinatal Hospital, or a Regional Perinatal Center (RPC). Each Level I, II, III and IV hospital maintains a relationship with its designated RPC for consultation, transport and continuing education. Patients are transferred to the appropriate RPC when medically appropriate, if beds are available. True regionalization for the optimization of perinatal care includes a stated goal of back-transporting infants when they no longer require the highest level of care. Convalescing infants benefit from a community-based program closer to home that promotes parent education and family bonding to facilitate a safe and timely discharge. In this way, quality care is provided to mothers and newborn infants, and specially trained perinatal personnel and intensive care facilities can be used efficiently and cost-effectively.

The complete descriptions of the five levels of perinatal services described briefly below are outlined in the Section of Regulation 61-16 entitled *Designation of Inpatient Perinatal Care Services*.

Basic Perinatal Center with Well Newborn Nursery (Level I). Level I hospitals provide services for normal uncomplicated pregnancies. A full list of the requirements for a Level I Basic Perinatal Center with Well Newborn Nursery can be found at Regulation 61-16, Section 1306.A.

Specialty Perinatal Center with Special Care Nursery (Level II). In addition to complying with the requirements of Regulation 61-16, Section 1306.A, Level II hospitals provide services for both normal and selected high-risk obstetrical and neonatal patients. A full list of the requirements for a Level II Specialty Perinatal Center can be found at Regulation 61-16, Section 1306.B.

Subspecialty Perinatal Center with Neonatal Intensive Care Unit (Level III). In addition to complying with the requirements of Regulation 61-16, Sections 1306.A and 1306.B, Level III hospitals provide all aspects of perinatal care, including intensive care and a range of continuously available, subspecialty consultation as recommended in the most recent edition of the *Guidelines for Perinatal Care* (GPC) by the American Academy of Pediatrics (AAP) and The American College of Obstetricians and Gynecologists. A full list of the requirements for a Level III Subspecialty Perinatal Center with Neonatal Intensive Care Unit can be found at Regulation 61-16, Section 1306.C. Neonatal transport may only be performed by Regional Perinatal Centers.

Regional Perinatal Center with Neonatal Intensive Care Unit (RPC). In addition to complying with the requirements of Regulation 61-16, Sections 1306.A through 1306.C, RPCs provide consultative, outreach, and support services to other hospitals in the region. A full list of the requirements for a Regional Perinatal Center can be found at Regulation 61-16, Section 1306.D. No more than one Regional Perinatal Center will be approved in each perinatal region.

Complex Neonatal Intensive Care Unit (Level IV). In addition to complying with the requirements of Regulation 61-16, Sections 1306.A through 1306.C, Level IV hospitals shall include additional capabilities and considerable experience in the care of the most complex and critically ill newborn infants and have pediatric medical and surgical specialty consultants available 24 hours a day. A full list of the requirements for a Complex Neonatal Intensive Care Unit can be found at Regulation 61-16, Section 1306.E. A Level IV hospital need not act as a Regional Perinatal Center (RPC).

The Perinatal-Capable Facilities Chart is located at the end of this Chapter.

NEONATAL SERVICES (NEONATAL INTENSIVE CARE BASSINETS)

Neonatal services are highly specialized and are only required by a very small percentage of infants. The need for these services is affected by the incidence of high-risk deliveries, the percentage of live births requiring neonatal services, and the average length of stay. The limited need for these services requires that they be planned for on a regional basis, fostering the location of these specialized units in hospitals that have the necessary staff, equipment, and consultative services and facilities. Referral networks facilitate the transfer of infants requiring this level of services from other facilities.

CERTIFICATE OF NEED PROJECTIONS AND STANDARDS

1. The projected need for neonatal intensive care bassinets is calculated on a regional basis:
 - a. For each region take the average number of births from 2019-2021 and the average population of women age 15-44 for 2019-2021 to generate an average birth rate.
 - b. Multiply the average birth rate against the projected 2026 population of women age 15-44 to project the number of births in 2026.
 - c. Generate the projected number of intensive care bassinets needed in a region by applying a constant of 3.25 bassinets per 1,000 live births to the projected birth rate and subtracting the existing bassinets from this total.
 - d. Any Level III, Level IV, or RPC neonatal unit may request additional intensive care bassinets beyond those indicated as needed by the methodology above. The Level III, Level IV, or RPC neonatal unit requesting the addition must document the need for additional intensive care bassinets based on historical and projected utilization, projected population growth, routine swing of intermediate care bassinets into the

intensive care setting, or other factors demonstrating the need for the proposed bassinets.

- e. In the absence of a projected need for Level III Intensive Care bassinets in a Perinatal Region as set forth in this Chapter, an existing Level II facility can be approved for a Certificate of Need to become a Subspecialty Perinatal Center and establish up to eight (8) neonatal intensive care bassinets (NICU beds), provided the applicant can demonstrate, during the 12 month period immediately prior to the month in which the CON application is submitted to the Department, a minimum of 1,500 births and 2,500 intermediate patient days at its facility.

2. Only Level III, Level IV, and RPC neonatal units have intensive care bassinets.

The Intensive and Intermediate Bassinets Chart, Utilization of Neonatal Special Care Units Chart and NICU Bed Need Chart are located at the end of this Chapter.

The addition of neonatal intermediate care bassinets does not require Certificate of Need review.

In some areas the number of intensive care bassinets should be increased. The intermediate care bassinets should be better utilized in Level II facilities so babies can be transferred back closer to their home community, potentially alleviating the high utilization of the current intensive/intermediate care bassinets in RPC facilities in some areas of the State. To improve the availability of the existing RPC neonatal intensive care bassinets, utilization of the back transport concept should be supported. This component of regionalized care involves the transfer of infants who no longer require neonatal intensive care to facilities with intermediate or continuing care bassinets appropriate to the individual baby's care needs. If more back transfers to the Level II facilities occurred, then some of the overcrowding problems of the existing RPC units would be alleviated.

It should be noted that some RPC, Level III, and Level IV facilities with intensive care bassinets may at times have intermediate type infants in intensive care bassinets and vice versa as the patient load changes within the unit. RPCs may use intermediate and intensive care bassinets interchangeably as the level of care required by the neonate varies.

RELATIVE IMPORTANCE OF PROJECT REVIEW CRITERIA

The following criteria are considered the most important in evaluating Certificate of Need applications for neonatal intensive care bassinets:

1. Compliance with the Need Outlined in this Section of this Plan;
2. Distribution (Accessibility);
3. Record of the Applicant; and
4. Adverse Effects on Other Facilities.

Because neonatal services are planned and located regionally due to the small percentage of infants requiring neonatal services, this service is available within approximately 30 minutes travel time for the majority of the population. The benefits of improved accessibility will be equally

weighed with the adverse effects of duplication in evaluating Certificate of Need applications for this service.

CMS MAJOR DIAGNOSTIC CATEGORIES (Chapter 5)

- MDC 1: Diseases and Disorders of the Nervous System
- MDC 2: Diseases and Disorders of the Eye
- MDC 3: Diseases and Disorders of the Ear, Nose, Mouth and Throat
- MDC 4: Diseases and Disorders of the Respiratory System
- MDC 5: Diseases and Disorders of the Circulatory System
- MDC 6: Diseases and Disorders of the Digestive System
- MDC 7: Diseases and Disorders of the Hepatobiliary System and Pancreas
- MDC 8: Diseases and Disorders of the Musculoskeletal System and Connective Tissue
- MDC 9: Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast
- MDC 10: Endocrine, Nutritional and Metabolic Diseases and Disorders
- MDC 11: Diseases and Disorders of the Kidney and Urinary Tract
- MDC 12: Diseases and Disorders of the Male Reproductive System
- MDC 13: Diseases and Disorders of the Female Reproductive System
- MDC 14: Pregnancy, Childbirth, and Puerperium
- MDC 15: Newborns and Other Neonates with Conditions Originating in the Perinatal Period
- MDC 16: Diseases and Disorders of the Blood, Blood Forming Organs, Immunological Disorders
- MDC 17: Myeloproliferative Diseases and Disorders, and Poorly Differentiated Neoplasm
- MDC 18: Infectious and Parasitic Diseases (Systemic or Unspecified Sites)
- MDC 19: Mental Diseases and Disorders
- MDC 20: Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental Disorders
- MDC 21: Injuries, Poisonings and Toxic Effects of Drugs
- MDC 22: Burns
- MDC 23: Factors Influencing Health Status and Other Contacts with Health Services
- MDC 24: Multiple Significant Trauma
- MDC 25: Human Immunodeficiency Virus Infections

**GENERAL BED NEED*
(Chapter 5)**

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Region I														
Abbeville Area Medical Center 1	<18	4,783	4,365		0									
	18-64	13,741	12,880		0									
	+65	5,546	5,938		0									
	TOTAL	24070	23183	0	0	65%	0	25	25	-25	0.00%			
Abbeville County Total							0	25	25	-25		39	14	-25
AnMed Health Medical Center 2	<18	46,404	47,781	34	0									
	18-64	121,758	127,403	36,207	104									
	+65	37,905	43,058	48,822	152									
	TOTAL	206,067	218,242	85,063	256	75%	342	495	274	-153	47.08%			
Anderson County Total							342	495	274	-153		0	-495	-153
Cherokee Medical Center	<18	12,856	12,200	0	0									
	18-64	33,505	32,561	2,263	6									
	+65	9,710	10,545	2,784	8									
	TOTAL	56,071	55,306	5,047	14	65%	21	125	80	-104	11.06%			
Cherokee County Total							21	125	80	-104		93	-32	-104
Prisma Health Greenville Memorial Hospital	<18	121,701	125,853	26,564	75									
	18-64	324,342	345,224	107,325	313									
	+65	88,040	105,542	67,852	223									
	TOTAL	534,083	576,619	201,741	611	75%	815	746	648	69	74.09%			
Prisma Health Greer Memorial Hospital	<18	121,701	125,853	118	0									
	18-64	324,342	345,224	10,788	31									
	+65	88,040	105,542	8,547	28									
	TOTAL	534,083	576,619	19,453	60	65%	93	82	70	11	64.99%			
Prisma Health Hillcrest Hospital	<18	121,701	125,853	6	0									
	18-64	324,342	345,224	4,198	12									
	+65	88,040	105,542	3,643	12									
	TOTAL	534,083	576,619	7,847	24	65%	38	43	43	-5	50.00%			
Prisma Health Patewood Hospital	<18	121,701	125,853	14	0									
	18-64	324,342	345,224	7,070	21									
	+65	88,040	105,542	563	2									
	TOTAL	534,083	576,619	7,647	23	65%	35	72	72	-37	29.10%			
Saint Francis - Downtown & Saint Francis - Millennium	<18	121,701	125,853	3	0									
	18-64	324,342	345,224	27,864	81									
	+65	88,040	105,542	38,937	128									
	TOTAL	534,083	576,619	66,804	209	70%	299	226	226	73	80.98%			
Saint Francis - Eastside	<18	121,701	125,853	27	0									
	18-64	324,342	345,224	11,548	34									
	+65	88,040	105,542	8,119	27									
	TOTAL	534,083	576,619	19,694	60	65%	93	93	93	0	58.02%			
Greenville County Total							1,373	1,262	1,152	111		966	-296	111
Self Regional Healthcare 1	<18	15,990	15,425	0	0									
	18-64	40,038	38,635	0	0									
	+65	13,210	14,272	0	0									
	TOTAL	69,238	68,332	58,277	158	70%	226	326	304	-100	48.98%			
Greenwood County Total							226	326	304	-100		115	-211	-100
Prisma Health Laurens County Hospital	<18	14,991	15,052	22	0									
	18-64	39,958	39,525	5,334	14									
	+65	12,788	14,176	7,391	22									
	TOTAL	67,737	68,753	12,747	37	65%	57	76	57	-19	45.95%			
Laurens County Total							57	76	57	-19		116	40	-19

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Prisma Health Oconee Memorial Hospital	<18	15,203	14,945	110	0									
	18-64	44,890	45,361	12,917	36									
	+65	19,046	21,670	17,732	55									
	TOTAL	79,139	81,976	30,759	91	65%	141	169	132	-28	49.86%			
Oconee County Total							141	169	132	-28		138	-31	-28
Prisma Health Baptist Easley Hospital	<18	28,148	30,808		0									
	18-64	82,888	89,292	8,323	25									
	+65	22,743	27,157	11,077	36									
	TOTAL	133,779	147,257	19,400	61	65%	94	109	89	-15	48.76%			
AnMed Health Cannon 1	<18	28,148	30,808		0									
	18-64	82,888	89,292		0									
	+65	22,743	27,157		0									
	TOTAL	133,779	147,257	2,753	8	65%	13	55	26	-42	13.71%			
Pickens County Total							107	164	115	-57		247	83	-57
Spartanburg Medical Center - Mary Black Campus	<18	78,189	86,009		0									
	18-64	203,027	228,145	12,760	39									
	+65	55,137	65,315	15,688	51									
	TOTAL	336,353	379,469	28,448	90	65%	139	174	119	-35	44.79%			
Spartanburg Medical Center	<18	78,189	86,009	2,058	6									
	18-64	203,027	228,145	80,062	246									
	+65	55,137	65,315	67,067	218									
	TOTAL	336,353	379,469	149,187	470	75%	628	484	456	144	84.45%			
Pelham Medical Center (Village Hospital)	<18	78,189	86,009		0									
	18-64	203,027	228,145	6,153	19									
	+65	55,137	65,315	7,074	23									
	TOTAL	336,353	379,469	13,227	42	65%	65	48	48	17	75.50%			
Spartanburg County Total							832	706	623	126		636	-70	126
Union Medical Center 1	<18	5,662	5,452		0									
	18-64	15,745	14,901	941	2									
	+65	5,624	5,936	959	3									
	TOTAL	27,031	26,289	1,900	5	65%	9	85	50	-76	6.12%			
Union County Total							9	85	50	-76		45	-40	-76
Region II														
Aiken Regional Medical Center 2	<18	35,969	35,170	305	1									
	18-64	98,893	97,545	19,379	52									
	+65	34,658	39,252	18,825	58									
	TOTAL	169,520	171,967	38,509	112	70%	160	197	197	-37	53.56%			
Aiken County Total							160	197	197	-37		289	92	-37
MUSC Health Chester Medical Center	<18	7,227	7,053	3	0									
	18-64	18,836	18,305	1,137	3									
	+65	6,167	6,549	1,498	4									
	TOTAL	32,230	31,907	2,638	7	65%	12	82	36	-70	8.81%			
Chester County Total							12	82	36	-70		54	-28	-70

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Edgefield County Healthcare	<18	4,391	3,901			0								
	18-64	15,871	14,511	57		0								
	+65	5,167	5,494	217		1								
	TOTAL	25,429	23,906	274	1	65%	2	25	25	-23	3.00%			
Edgefield County Total							2	25	25	-23		41	16	-23
Kershaw Health	<18	14,982	15,011	20		0								
	18-64	38,358	38,823	5,904		16								
	+65	12,532	13,951	7,611		23								
	TOTAL	65,872	67,785	13,535	38	65%	59	99	90	-40	37.46%			
Kershaw County Total							59	99	90	-40		114	15	-40
MUSC Health Lancaster Medical Center 3	<18	20,827	22,293	54		0								
	18-64	56,396	62,931	11,333		35								
	+65	21,529	26,166	13,399		45								
	TOTAL	98,752	111,390	24,786	77	70%	110	101	89	9	67.23%			
MUSC Health Indian Land Medical Center 3	<18	20,827	22,293	0		0								
	18-64	56,396	62,931	0		0								
	+65	21,529	26,166	0		0								
	TOTAL	98,752	111,390	0	0	65%	0	98	0	-98	0.00%			
Lancaster County Total							110	199	146	-89		187	-12	-89
Lexington Medical Center 4	<18	66,896	66,645	95		0								
	18-64	180,521	185,271	73,077		205								
	+65	49,806	58,597	71,959		232								
	TOTAL	297,223	310,513	145,131	438	75%	584	607	565	-23	65.51%			
Lexington County Total							584	607	565	-23		521	-86	-23
Newberry County Memorial Hospital	<18	8,291	8,114	16		0								
	18-64	21,648	20,913	2,851		8								
	+65	7,733	8,319	3,701		11								
	TOTAL	37,672	37,346	6,568	18	65%	29	90	54	-61	19.99%			
Newberry County Total							29	90	54	-61		63	-27	-61
Prisma Health Baptist Parkridge	<18	94,493	95,441	1,709		5								
	18-64	266,438	264,804	8,807		24								
	+65	57,160	67,009	7,278		23								
	TOTAL	418,091	427,254	17,794	52	65%	81	76	76	5	64.15%			
Prisma Health Baptist	<18	94,493	95,441	6,707		19								
	18-64	266,438	264,804	22,497		61								
	+65	57,160	67,009	16,644		53								
	TOTAL	418,091	427,254	45,848	133	70%	191	287	292	-96	43.77%			
Prisma Health Richland	<18	94,493	95,441	30,849		85								
	18-64	266,438	264,804	67,950		185								
	+65	57,160	67,009	53,202		171								
	TOTAL	418,091	427,254	152,001	441	75%	589	579	573	10	71.92%			
Providence Health	<18	94,493	95,441			0								
	18-64	266,438	264,804	10,518		29								
	+65	57,160	67,009	15,281		49								
	TOTAL	418,091	427,254	25,799	78	70%	112	258	173	-146	27.40%			
Providence Health - Northeast	<18	94,493	95,441			0								
	18-64	266,438	264,804	2,087		6								
	+65	57,160	67,009	2,315		7								
	TOTAL	418,091	427,254	4,402	13	65%	21	74	43	-53	16.30%			
Richland County Total							994	1,274	1,157	-280		716	-558	-280

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Piedmont Medical Center 5	<18	68,831	74,882	1,987	6									
	18-64	178,728	205,445	36,650	115									
	+65	43,519	55,067	32,688	113									
	TOTAL	291,078	335,394	71,325	235	70%	336	262	250	74	74.58%			
Fort Mill Medical Center 5	<18	68,831	74,882											
	18-64	178,728	205,445											
	+65	43,519	55,067											
	TOTAL	291,078	335,394	0	0	70%		100	64	-100	0			
York County Total							336	362	314	-34		562	200	-34
Region III														
McLeod Health Cheraw	<18	9,315	8,376	11	0									
	18-64	25,111	22,289	4,149	10									
	+65	8,253	8,489	4,926	14									
	TOTAL	42,679	39,154	9,086	24	65%	37	59	40	-22	42.19%			
Chesterfield County Total							37	59	40	-22		66	7	-22
McLeod Health Clarendon	<18	5,648	4,635	42	0									
	18-64	17,221	14,707	3,622	8									
	+65	7,640	7,665	4,202	12									
	TOTAL	30,509	27,007	7,866	20	65%	31	81	49	-50	26.61%			
Clarendon County Total							31	81	49	-50		46	-35	-50
Carolina Pines Regional Medical Center	<18	13,684	12,442	403	1									
	18-64	35,932	31,774	7,631	18									
	+65	12,302	12,203	6,790	18									
	TOTAL	61,918	56,419	14,824	38	65%	59	116	80	-57	35.01%			
McLeod Medical Center - Darlington 6	<18	13,684	12,442	0	0									
	18-64	35,932	31,774	6,947	17									
	+65	12,302	12,203	253	1									
	TOTAL	61,918	56,419	7,200	18	65%	28	0	0	28	40.26%			
Darlington County Total							87	116	80	-29		95	-21	-29
McLeod Medical Center Dillon	<18	6,961	6,091	124	0									
	18-64	15,970	13,867	5,419	13									
	+65	4,831	4,716	3,485	9									
	TOTAL	27,762	24,674	9,028	23	65%	35	79	34	-44	31.31%			
Dillon County Total							35	79	34	-44		42	-37	-44
MUSC Health Florence Medical Center	<18	31,701	29,863	14	0									
	18-64	80,427	77,053	24,710	65									
	+65	24,167	26,018	28,956	85									
	TOTAL	136,295	132,934	53,680	143	70%	205	310	310	-105	47.44%			
MUSC Health Florence Women's Pavilion	<18	31,701	29,863		0									
	18-64	80,427	77,053		0									
	+65	24,167	26,018		0									
	TOTAL	136,295	132,934	2,219	6	65%	10	20	0	-10	30.40%			
Lake City Community Hospital 7	<18	31,701	29,863	3	0									
	18-64	80,427	77,053	310	1									
	+65	24,167	26,018	345	1									
	TOTAL	136,295	132,934	658	2	65%	3	48	26	-45	3.76%			
McLeod Regional Medical Center of the Pee Dee	<18	31,701	29,863	2,696	7									
	18-64	80,427	77,053	68,165	179									
	+65	24,167	26,018	65,668	194									
	TOTAL	136,295	132,934	136,529	380	75%	507	517	440	-10	72.35%			
Florence County Total							725	895	776	-170		223	-672	-170
Tidelands Georgetown Memorial Hospital	<18	10,905	10,117	2	0									
	18-64	33,708	32,708	8,567	23									
	+65	19,136	22,455	10,094	32									
	TOTAL	63,749	65,280	18,663	55	65%	85	131	131	-46	39.03%			

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Tidelands Waccamaw Community Hospital	<18			205		1								
	18-64	10,905	10,117											
	+65	33,708	32,708	12,095		32								
	TOTAL	63,749	65,280	29,854	89	65%	138	124	124	14	65.96%			
Georgetown County Total								223	255	255		110	-145	-32
Conway Hospital 7	<18	62,559	63,734	1,373		4								
	18-64	204,633	224,466	19,046		57								
	+65	96,083	135,079	18,599		72								
	TOTAL	363,275	423,279	39,018	133	65%	205	160	172	45	66.81%			
Conway Medical Center - Carolina Forest 7	<18	62,559	63,734	0		0								
	18-64	204,633	224,466	0		0								
	+65	96,083	135,079	0		0								
	TOTAL	363,275	423,279	0	0	65%	0	50	0	-50	0.00%			
Grand Strand Medical Center 8	<18	62,559	63,734	4,658		13								
	18-64	204,633	224,466	46,295		139								
	+65	96,083	135,079	55,063		212								
	TOTAL	363,275	423,279	106,016	364	75%	486	357	325	129	81.36%			
McLeod Health Carolina Forest 9	<18	62,559	63,734	0		0								
	18-64	204,633	224,466	0		0								
	+65	96,083	135,079	0		0								
	TOTAL	363,275	423,279	0	0	65%	0	48	0	-48	0.00%			
McLeod Loris	<18	62,559	63,734	37		0								
	18-64	204,633	224,466	6,514		20								
	+65	96,083	135,079	6,845		26								
	TOTAL	363,275	423,279	13,396	46	65%	71	50	50	21	73.40%			
McLeod Seacoast 10	<18	62,559	63,734	7		0								
	18-64	204,633	224,466	10,277		31								
	+65	96,083	135,079	19,396		75								
	TOTAL	363,275	423,279	29,680	106	65%	163	155	118	8	52.46%			
South Strand Medical Center 11	<18	62,559	63,734	0		0								
	18-64	204,633	224,466	0		0								
	+65	96,083	135,079	0		0								
	TOTAL	363,275	423,279	0	0	65%	0	59	0	-59	0.00%			
Tidelands Health Carolina Bays 12	<18	62,559	63,734	0		0								
	18-64	204,633	224,466	0		0								
	+65	96,083	135,079	0		0								
	TOTAL	363,275	423,279	0	0	65%	0	36	0	-36	0.00%			
Horry County Total							925	915	665	10		710	-205	10
MUSC Health Marion Medical Center	<18	6,308	5,355	12		0								
	18-64	16,202	14,136	4,708		11								
	+65	6,011	5,909	6,178		17								
	TOTAL	28,521	25,400	10,898	28	65%	43	124	129	-81	24.08%			
Marion County Total							43	124	129	-81		43	-81	-81
Prisma Health Tuomey Hospital	<18	25,124	23,913	2,742		7								
	18-64	61,802	58,180	18,642		48								
	+65	18,019	19,860	21,470		65								
	TOTAL	104,945	101,953	42,854	120	70%	172	283	197	-111	41.49%			
Sumter County Total							172	283	197	-111		171	-112	-111
Williamsburg Regional Hospital 1	<18	6,096	5,422	0		0								
	18-64	17,544	15,699	0		0								
	+65	6,946	7,509	0		0								
	TOTAL	30,586	28,630	2,886	7	65%	12	25		-13	31.63%			
Black River Medical Center 13	<18	6,096	5,422	0		0								
	18-64	17,544	15,699	0		0								
	+65	6,946	7,509	0		0								
	TOTAL	30,586	28,630	0	0	65%	0	25		-25	0.00%			
Williamsburg County Total							12	50	0	-38		48	-2	-2
Region IV														
Allendale County Hospital 14	<18	1,520	1,334	NR		0								
	18-64	4,546	3,483	NR		0								

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
	+65	1,679	1,538	NR	0									
	TOTAL	7,745	6,355	0	0	65%	0	25	25	-25	0.00%			
Allendale County Total							0	25	25	-25		11	-14	-25

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Beaufort Memorial Hospital	<18	34,641	32,384	147	0									
	18-64	100,200	101,132	14,005	39									
	+65	54,196	63,237	16,358	52									
	TOTAL	189,037	196,753	30,510	91	65%	141	169	169	-28	49.46%			
Hilton Head Hospital	<18	34,641	32,384	8	0									
	18-64	100,200	101,132	6,992	19									
	+65	54,196	63,237	16,298	52									
	TOTAL	189,037	196,753	23,298	71	65%	110	93	93	17	68.63%			
South Of Broad Hospital 15	<18	34,641	32,384		0									
	18-64	100,200	101,132		0									
	+65	54,196	63,237		0									
	TOTAL	189,037	196,753	0	0	65%	0	20		-20				
Beaufort County Total							251	282	262	-31		330	48	-31
Roper St. Francis- Berkeley 16	<18	56,235	61,395	25	0									
	18-64	146,263	166,608	6,384	20									
	+65	34,975	45,848	4,487	16									
	TOTAL	237,473	273,851	10,896	36	65%	56	100	50	-44	29.85%			
MUHA Community Hospital 17	<18	56,235	61,395	0	0									
	18-64	146,263	166,608	0	0									
	+65	34,975	45,848	0	0									
	TOTAL	237,473	273,851	0	0	65%	0	128	128	-128	0.00%			
Berkeley County Total *							56	228	178	-172		459	231	231
Bon Secours - Saint Francis Xavier Hospital :	<18	80,988	79,488	76	0									
	18-64	259,628	265,300	19,068	53									
	+65	72,010	85,774	15,569	51									
	TOTAL	412,626	430,562	34,713	104	70%	150	190	149	-40	50.05%			
East Cooper Medical Center	<18	80,988	79,488	12	0									
	18-64	259,628	265,300	8,664	24									
	+65	72,010	85,774	7,114	23									
	TOTAL	412,626	430,562	15,790	48	65%	74	130	130	-56	33.28%			
Mount Pleasant Hospital	<18	80,988	79,488	0	0									
	18-64	259,628	265,300	4,489	13									
	+65	72,010	85,774	7,073	23									
	TOTAL	412,626	430,562	11,562	36	65%	55	85	73	-30	37.27%			
MUSC Medical Center	<18	80,988	79,488	29,405	79									
	18-64	259,628	265,300	108,319	303									
	+65	72,010	85,774	65,454	214									
	TOTAL	412,626	430,562	203,178	596	75%	795	685	656	110	81.26%			
Roper Hospital	<18	80,988	79,488	0	0									
	18-64	259,628	265,300	24,240	68									
	+65	72,010	85,774	34,677	113									
	TOTAL	412,626	430,562	58,917	181	70%	259	266	241	-7	60.68%			
Trident Medical Center	<18	80,988	79,488	65	0									
	18-64	259,628	265,300	34,904	98									
	+65	72,010	85,774	37,419	122									
	TOTAL	412,626	430,562	72,388	220	70%	315	282	273	33	70.33%			
Charleston County Total							1,648	1,638	1,522	10		722	-916	10

GENERAL BED NEED*
(Chapter 5)

Facility by Region and County	Age Cat	2021 Pop	2027 Pop	2021 Pt Days	Proj ADC	Var. Rate Factor	Bed Need	Licensed / Approved Beds	Staffed / Approved Beds	Add/ Excess Use	2021 % Occup. Rate	Statewide Bed Need	Add/ Excess State	Bed Need
Colleton Medical Center	<18	8,751	9,067	577		2								
	18-64	22,000	22,011	6,352		17								
	+65	7,996	8,829	7,593		23								
	TOTAL	38,747	39,907	14,522	41	65%	64	116	112	-52	34.30%			
Colleton County Total							64	116	112	-52		67	-49	-52
Summerville Medical Center ¹⁹	<18	38,629	38,412	4,020		11								
	18-64	100,412	104,469	22,632		65								
	+65	24,591	30,297	9,905		33								
	TOTAL	163,632	173,178	36,557	109	65%	168	174	124	-6	57.56%			
Dorchester County Total							168	174	124	-6		291	117	-6
Hampton Regional Medical Center	<18	3,983	3,672	0		0								
	18-64	10,526	9,085	1,106		3								
	+65	3,749	3,995	2,160		6								
	TOTAL	18,258	16,752	3,266	9	65%	14	32	14	-18	27.96%			
Hampton County Total							14	32	14	-18		29	-3	-18
Coastal Carolina Hospital (Formerly - Coastal Carolina Medical Center)	<18	5,493	5,116	15		0								
	18-64	17,284	16,947	4,705		13								
	+65	6,645	9,458	4,859		19								
	TOTAL	29,422	31,521	9,579	32	65%	49	41	35	8	64.01%			
Jasper County Total							49	41	35	8		53	12	8
Regional Medical Center of Orangeburg & Calhoun Counties ¹	<18	18,549	16,622			0								
	18-64	47,057	42,273			0								
	+65	17,329	17,908			0								
	TOTAL	82,935	76,803	47,105	120	70%	171	247	209	-76	52.25%			
Orangeburg County Total							171	247	209	-76		129	-118	-76
Bamberg		12,983	11,409									20	20	20
Barnwell		20,337	18,925									32	32	32
Fairfield		20,459	18,046									31	31	31
Lee		16,197	14,642									25	25	25
McCormick		9,470	9,149									16	16	16
Marlboro		26,328	25,031									42	42	42
Saluda		18,566	16,977									29	29	29
Calhoun		13,983	13,090									22	22	22
Counties Without General Hospitals														
Statewide Total		5,177,874	5,460,568	2,385,240	6,535			12,008				0.001675		
Beds per person .0022613					SW ADC		SW Need							
Beds Per Population Multiplier		0.0016751			6,535	0.75	8,713	0						

¹ Age cohorts not adequately reported.

² SC-21-31 AnMed Health Medical Center transfer 72 acute care beds from AnMed Health Women's and Children's Hospital with zero (0) acute care beds at AnMed Health Women's and Children's Hospital.

³ Staff decision approving construction of a 98 acute care bed hospital through transfer of 98 acute care beds from MUSC Health Lancaster Medical. On appeal.

⁴ CON SC-22-41 issued 7/25/2023 for the addition of 50 inpatient hospital beds for a total of 607.

⁵ CON SC-19-74 issued 5/30/2019 for construction of a 100-bed hospital in Fort Mill using a combination of new and transferred hospital beds. Fort Mill Medical Center opened

⁶ E-21-01 Decrease in 49 general acute care beds resulting in a licensed bed capacity of 23 behavioral health beds.

⁷ CON SC-22-79 issued 11/16/2022 for construction for the establishment of 50 bed acute care hospital through the transfer of 50 beds from Conway Medical Center.

⁸ CON SC-19-111 issued 11/12/2019 for the addition of 32 general hospital beds.

⁹ Staff decision approving a 48 bed acute care hospital. On appeal.

¹⁰ CON SC-20-95 issued 11/23/2020 for the addition of 50 general hospital beds for a total of 155 general hospital beds.

¹¹ Staff decision approving the expansion of an existing facility for the additon of 59 acute care beds. On appeal.

¹² Staff decision approving a 36 bed acute care hospital. On appeal.

¹³ CON SC-20-38 issued 9/10/2020 for construction of a 25 bed hospital.

¹⁴ Facility did not submit JARS.

¹⁵ Staff decision approving a 20-bed acute care hospital in Beaufort County. On appeal.

¹⁶ CON SC-22-78 issued 12/5/2022 for the addition of 50 general acute care beds.

¹⁷ CON SC-20-25 issued 9/29/2020 approving a 128-bed acute care hospital in Berkeley County. On appeal.

¹⁸ E-20-23 Decrease in licensed bed capacity by 11 general acute care beds for a total of 190 general acute care beds.

¹⁹ CON SC-22079 issued 12/5/2022 for the addition of 50 acute care hospital beds for a total of 174 acute care hospital beds.

* Berkeley Medical Center returned CON SC-16-19 issued 5/26/2016 for the construction of a new 50 bed acute care hospital.

**LONG-TERM ACUTE CARE HOSPITALS
(Chapter 5)**

Facility By Region	County	2019			2020			2021		
		Beds	Pt Days	Occupancy Rate	Beds	Pt Days	Occupancy Rate	Beds	Pt Days	Occupancy Rate
Region I										
Prisma Health North Greenville Long Term Acute Care Hospital	Greenville	45	7,315	44.5%	45	5,581	34.0%	45	3,512	21.38%
Regency Hospital of Greenville	Greenville	32	8,646	74.0%	32	9,624	82.4%	32	8,980	76.88%
Spartanburg Hospital for Restorative Care	Spartanburg	97	9,710	27.4%	97	11,595	32.7%	97	11,723	33.11%
Region II										
Continuecare Hospital at Prisma Health Baptist	Richland	35	0	0.0%	35	NR	#VALUE!	35	NR	
Region III										
Regency Hospital of Florence 1	Florence	40	13,844	94.8%	40	14,359	98.3%	44	14,568	90.70%
Tidelands Health Extended Care Hospital 2	Horry									
Region IV										
Vibra Hospital of Charleston	Charleston	59	16,655	77.3%	59	14,643	68.0%	59	15,103	70.13%

0 in Pt Days is no Pt Days reported

NR in Pt Days is no JAR submitted

1 Regency Hospital of Florence: SC-21-75 issued 11/29/2021 for the addition of 4 long term acute care beds for a total of 44 long term acute care beds.

**PSYCHIATRIC PROGRAMS
(Chapter 5)**

2021

Facility by Region	County	Beds	Pt. Days	Occup Rate
Region I				
AnMed Health Medical Center 1	Anderson	38	7,692	55.5%
Carolina Center Behavioral Health 2	Greenville	117		0.0%
Prisma Health Greenville Memorial Hospital	Greenville	65	17,673	74.5%
Springbrook Behavioral Health	Greenville	56	13,690	67.0%
Self Regional Healthcare	Greenwood	32	2,397	20.5%
Spartanburg Medical Center 3	Spartanburg	32	802	6.9%
Spartanburg Medical Center - Mary Black Campus 3	Spartanburg	39	7,155	50.3%
Region II				
Aiken Regional Medical Centers	Aiken	44	11,176	69.6%
MUSC Health Kershaw Medical Center 4	Kershaw	20	3,175	43.5%
Rebound Behavioral Health	Lancaster	45	15,555	94.7%
MUSC Health Lancaster Medical Center 5	Lancaster	12	0	0.0%
Three Rivers Behavioral Health 6	Lexington	112	31,920	78.1%
Prisma Health Baptist	Richland	55	8,072	40.2%
Prisma Health Richland	Richland	52	8,674	45.7%
Piedmont Medical Center 7	York	20	7,080	97.0%
Region III				
McLeod Medical Center - Darlington	Darlington	23	7,130	84.9%
South Strand Medical Center 8	Horry	22	6,398	79.7%
Lighthouse Behavioral Health Hospital	Horry	76	18,615	67.1%
Region IV *				
Beaufort Memorial Hospital 9	Beaufort	18	2,508	38.2%
MUSC Medical Center	Charleston	82	28,384	94.8%
Palmetto Lowcountry Behavioral Health 10	Charleston	92	19,313	57.5%
Trident Medical Center 11	Charleston	60	8,585	39.2%
Colleton Medical Center	Colleton	19	5,206	75.1%
Regional Medical Center - Orangeburg & Calhoun	Orangeburg	15	3,560	65.0%

Government Facilities					
Patrick B. Harris Psychiatric Hospital	12	Anderson	108	39,969	101.4%
G. Werber Bryan Psychiatric Hospital	12	Richland	112	34,497	84.4%
Gilliam Psychiatric Hospital	12	Richland	82	NR	
William J McCord Adolescent Treatment Facility	12	Orangeburg	15	0	0.0%
		Total	1146	234,760	56.1%

1 SC-21-73 issued 11/18/2021 for the transfer of 38 inpatient psychiatric beds from AnMed Health Medical Center to the current Women's & Children's Hospital.

2 No 2021 Jars Reported

3 SC-20-20 issued 6/2/2020 for the relocation of 24 licensed psychiatric beds from Spartanburg Medical Center Church Street Campus to Spartanburg Medical Center-Mary Black Campus for a total of 39 psychiatric beds.

4 Formerly KershawHealth - Name change and ownership change effective 8/1/2021.

5 Bed and patient days were not reported in 2021 Jars.

6 SC-19-100 issued 9/5/2019 for the addition of 7 psychiatric beds for a total of 112 psychiatric beds.

7 SC-19-102 issued 9/9/2019 Effective 3/8/2022 the Applicant decided not to pursue the project and surrendered the CON.

8 SC-19-112 issued 11/12/2019 for the addition of 2 psychiatric beds for a total of 22 psychiatric beds.

9 SC-20-19 issued 6/2/2020 for the renovation of existing space and addition of 4 psychiatric beds for a total of 18 psychiatric beds.

10 SC-18-38 issued 8/6/2018 for the transfer of 48 psychiatric beds and 16 substance abuse beds and the addition of 39 psychiatric beds for a total of 103 beds in a newly constructed facility. On June 6, 2020, the applicant returned the CON and will not move forward with the project.

11 SC-18-37 issued 8/6/2013 for the addition of 43 psychiatric bed and the relocation of 17 psychiatric beds from Trident's main campus for a total of 60 beds.

12 State facility not operating all its licenced beds. Their utilization does not impact calculation of need.

* E-22-18 Permanent closure of Hilton Head Hospital psychiatric unit.

**PSYCHIATRIC BED NEED
(Chapter 5)**

Service Area	Age Cat	2021 Pop	2027 Pop	Existing Beds	2021 PT Days	Proj ADC	Occup Factor	Bed Need (Use)	Bed Need
Statewide Totals	<18	1,119,977	1,127,848						
	18-64	3,092,427	3,189,463						
	+65	965,469	1,143,256						
	TOTAL	5,177,873	5,460,567	1,146	234760	678	0.5	1357	211

**INPATIENT TREATMENT FACILITIES (SUBSTANCE ABUSE FACILITIES)*
(Chapter 5)**

Facility by Region	County	2021		
		Beds	Pt. Days	Occup Rate
Region I				
Carolina Center for Behavioral Health 1	Greenville	39	NR	#VALUE!
Springbrook Behavioral Health System	Greenville	6	291	13.3%
Region II				
Aiken Regional Medical Centers	Aiken	18	3,359	51.1%
Palmetto Health Baptist 2	Richland	10	0	0.0%
Palmetto Richland Springs (Palmetto Health Richland) 3	Richland	10	0	0.0%
Rebound Behavioral Health 4	Lancaster	18	NR	#VALUE!
Three Rivers Behavioral Health	Lexington	17	1,556	25.1%
Region III				
Lighthouse Behavioral Health Hospital	Horry	29	8,890	84.0%
Region IV				
MUSC Medical Center	Charleston	23	3,980	47.4%
Palmetto Lowcountry Behavioral Health	Charleston	16	890	15.2%
TOTAL		186	18,966	27.9%

* Morris Village is a State facility licensed for one hundred and sixty-three (163) substance abuse treatment beds that are not counted in the CON methodology.

1 Facility is licensed for 39 substance abuse treatment beds, but did not complete a 2020 JAR.

2 Facility is licensed for 10 substance abuse treatment beds, but reported 0 (zero) beds in 2020 JAR.

3 Facility is licensed for 10 substance abuse treatment beds, but reported 0 (zero) beds in 2020 JAR.

4 Facility is licensed for 18 substance abuse treatment beds, but did not complete a 2020 JAR.

**INPATIENT TREATMENT BED NEED (SUBSTANCE ABUSE)
(Chapter 5)**

SERVICE AREA	AGE CAT	2018 POP	2024 POP	EXISTING BEDS	2018 PT. DAYS	2018 USAGE RATE	CON RATE	BED NEED (USE)	+ / -	BED NEED (SW)	+ / -	BED NEED
Anderson, Oconee	0-17	61,467	62,585	0		0.00000	0.75	0		2		
	18-64	163,008	168,680			0.00000	0.75	0	0	4	8	8
	65+	54,381	63,370			0.00000	0.75	0		2		
Cherokee, Spartanburg, Union	0-17	91,457	94,915	0		0.00000	0.75	0		3		
	18-64	240,955	254,995			0.00000	0.75	0	0	6	11	11
	65+	65,964	77,510			0.00000	0.75	0		2		
Greenville, Pickens	0-17	142,076	151,325	35	15	0.00011	0.75	1		4		
	18-64	395,278	417,035		7,805	0.01975	0.75	31	3	10	-18	3
	65+	101,796	126,285		1,188	0.01167	0.75	6		3		
Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda	0-17	45,945	44,530	0		0.00000	0.75	0		2		
	18-64	130,068	125,500			0.00000	0.75	0	0	3	7	7
	65+	43,269	49,425			0.00000	0.75	0		2		
Chester, Lancaster, York	0-17	94,525	104,960	18	0	0.00000	0.75	0		3		
	18-64	241,874	277,210		2,443	0.01010	0.75	11	-5	7	-5	-5
	65+	65,350	86,270		265	0.00406	0.75	2		3		
Fairfield, Kershaw, Lexington, Newberry, Richland	0-17	184,794	193,090	37	32	0.00017	0.75	1		5		
	18-64	527,507	538,385		1,304	0.00247	0.75	5	-29	13	-15	-15
	65+	123,821	152,035		272	0.00220	0.75	2		4		
Chesterfield, Dillon, Marlboro	0-17	23,032	21,445	0		0.00000	0.75	0		1		
	18-64	61,463	57,025			0.00000	0.75	0	0	2	4	4
	65+	18,256	20,390			0.00000	0.75	0		1		
Clarendon, Lee, Sumter	0-17	35,286	32,725	0		0.00000	0.75	0		1		
	18-64	93,491	86,885			0.00000	0.75	0	0	3	5	5
	65+	28,577	32,595			0.00000	0.75	0		1		
Darlington, Florence, Marion	0-17	54,489	51,170	12		0.00000	0.75	0		2		
	18-64	139,200	132,285		2,428	0.01744	0.75	9	-3	4	-4	-3
	65+	42,311	47,990			0.00000	0.75	0		2		

**INPATIENT TREATMENT BED NEED (SUBSTANCE ABUSE)
(Chapter 5)**

SERVICE AREA	AGE CAT	2018 POP	2024 POP	EXISTING BEDS	2018 PT. DAYS	2018 USAGE RATE	CON RATE	BED NEED (USE)	+ / -	BED NEED (SW)	+ / -	BED NEED
Georgetown, Horry, Williamsburg	0-17	79,493	82,695	29		0.00000	0.75	0		2		
	18-64	251,347	278,360		6,543	0.02603	0.75	27	7	7	-16	7
	65+	106,162	154,235		1,627	0.01533	0.75	9		4		
Aiken, Barnwell	0-17	41,885	40,850	18	481	0.01148	0.75	2		1		
	18-64	111,854	109,895		3,093	0.02765	0.75	12	0	3	-12	0
	65+	36,774	43,900		691	0.01879	0.75	4		2		
Allendale, Beaufort, Hampton, Jasper	0-17	46,708	46,420	0		0.00000	0.75	0		2		
	18-64	136,827	141,475			0.00000	0.75	0	0	4	8	8
	65+	62,405	80,945			0.00000	0.75	0		2		
Bamberg, Calhoun, Orangeburg	0-17	24,502	22,620	0		0.00000	0.75	0		1		
	18-64	67,638	59,815			0.00000	0.75	0	0	2	4	4
	65+	23,589	26,005			0.00000	0.75	0		1		
Berkeley, Charleston, Colleton, Dorchester	0-17	180,286	190,120	39	0	0.00000	0.75	0		5		
	18-64	517,757	559,505		3,910	0.00755	0.75	16	-21	13	-17	-17
	65+	127,260	167,130		238	0.00187	0.75	2		4		
Statewide Totals		5,084,127		188	32,335			140		148		17
	0-64	4,184,212	4,346,500	State Usage								
	65+	899,915	1,128,085	Rate								
	Total	5,084,127	5,474,585	0.000017								

**REHABILITATION PROGRAMS
(Chapter 5)**

Facility by Region	County	2021		
		Beds	Pt. Days	Occup Rate
Region I				
AnMed Health Rehabilitation Hospital	Anderson	60	16,138	73.7%
Encompass Health Rehabilitation Hospital of Greenville 1	Greenville	40	NR	NR
Roger C. Peace (Prisma Health Greenville Memorial Hospital)	Greenville	53	11,657	60.3%
St. Francis - Downtown	Greenville	19	2,630	37.9%
Greenwood Regional Rehabilitation Hospital	Greenwood	42	9,483	61.9%
Spartanburg Medical Center - Mary Black Campus	Spartanburg	18	4,731	72.0%
Spartanburg Rehabilitation Institute 2	Spartanburg	60	14,827	67.7%
Region II				
Aiken Regional Medical Centers	Aiken	14	2,329	45.6%
PAM Health Rehabilitation Hospital of Aiken 3	Aiken	36	NR	NR
Midlands Regional Rehabilitation Hospital	Kershaw	40	7,525	51.5%
Lexington Regional Rehabilitation Hospital 4	Lexington	36	NR	NR
Encompass Health Rehabilitation Hospital of Columbia 5	Richland	79	21,199	73.5%
Encompass Health Rehabilitation Hospital of Irmo 5	Richland	27	NR	NR
Encompass Health Rehabilitation Hospital of Rock Hill	York	50	NR	0.0%
Encompass Health Rehabilitation Hospital of Fort Mill 6	York	39	NR	NR
Region III				
MUSC Health Florence Rehabilitation Center 7	Florence	40	5,773	NR
Encompass Health Rehabilitation Hospital of Florence	Florence	88	15,660	48.8%
Tidelands Health Rehabilitation Hospital an Affiliate of Encompass Health	Georgetown	29	9,348	88.3%
Grand Strand Medical Center	Horry	24	8,610	98.3%
Conway Medical Center 8	Horry	12	NR	NR
Tidelands Health Rehabilitation Hospital at Little River an Affiliate of Encompass Health	Horry	46	10,996	65.5%
Tidelands Health Rehabilitation Hospital at Carolina Bays an Affiliate of Encompass Health 9	Horry	36	NR	NR
Region IV				
Beaufort Memorial Hospital 10	Beaufort	18	2,788	42.4%
Encompass Health Rehabilitation Hospital of Bluffton	Beaufort	38	10,555	76%
Lowcountry Rehabilitation Hospital 11	Berkeley	33	NR	NR
East Cooper Medical Center 12	Charleston	10	2,571	70%
Encompass Health Rehabilitation Hospital of Charleston	Charleston	49	11,868	66.4%
Roper Hospital	Charleston	66	14,957	62.1%
Trident Medical Center	Charleston	14	4,864	95.2%
Regional Medical Center of Orangeburg & Calhoun Counties	Orangeburg	24	5,137	58.6%
TOTAL		1140	193,646	46.5%

*CON SC-16-43 issued 8/11/16 for the establishment of a new 13 bed rehabilitation unit was withdrawn 9/11/20. Prisma Health Children's Hospital has beer

1 CON SC-19-113 issued 11/21/19 for the establishment of a 40 bed freestanding inpatient rehabilitation hospital in Greenville County, not yet implemented

2 CON SC-20-22 issued 6/24/20 for the addition of 15,100 sf and the addition of 20 rehabilitation beds.

3 Staff approved construction for the establishment of a 36 bed inpatient rehabilitation hospital on 2/22/2022. On appeal.

4 CON SC-21-02 issued 1/26/21 for the establishment of a 36 bed freestanding inpatient rehabilitation hospital in Lexington County, not yet implemented.

5 CON SC-21-03 issued 1/26/21 for the establishment of a 27 bed freestanding inpatient rehabilitation hospital in Richland County including the transfer of 17 beds from Encompass Health Columbia and the addition of 10 new beds, not yet implemented.

6 CON SC-21-06 issued 2/11/21 for the establishment of a 39 bed freestanding inpatient rehabilitation hospital in York County, not yet implemented.

7 CON SC-23-10 issued 2/7/2023 for the relocation of 40 inpatient rehabilitation beds from Cedar Street Campus to MUSC Health Florence Medical Center.

8 CON SC-21-01 issued 1/13/21 for the establishment of an inpatient rehabilitation unit with 12 inpatient rehabilitation beds, not yet implemented.

9 Staff approved construction for the establishment of a 36 bed inpatient Rehabilitation Hospital on 4/14/2022. On appeal.

10 CON SC-19-105 issued 9/16/19 for the addition of 4 rehabilitation beds, not yet implemented.

11 CON SC-19-82 issued 7/19/19 for the construction of a 33 bed freestanding rehabilitation hospital, not yet implemented.

12 CON SC-19-81 issued 7/19/19 for the development of a 10 bed inpatient rehabilitation unit, not yet implemented.

**REHABILITATION BED NEED
(Chapter 5)**

Service Area	>65 2021 Pop	>65 2027 Pop	2021 Pop	2027 Pop	Existing Beds	2021 PT Days	Proj ADC	Occup Factor	Bed Need (Use)	+ / -	Bed Need (SW)	+ / -	Need
Anderson, Oconee	56,951	64,728	285,206	300,218	60	16,138	47	0.70	67	7	76	16	16
Greenville, Pickens	110,783	132,699	667,862	723,877	112	14,287	42	0.70	60	-52	157	45	45
Cherokee, Spartanburg, Union	70,471	81,796	419,457	461,063	78	19,558	59	0.70	84	6	97	19	19
Chester, Lancaster, York	71,215	87,782	422,061	478,692	89	0	0	0.70	0	-89	104	15	15
Abbeville, Edgefield, Greenwood, Laurens, McCormick, Saluda	44,141	47,850	214,512	210,298	42	9,483	25	0.70	36	-6	57	15	15
Fairfield, Lexington, Newberry, Richland	119,527	138,998	773,446	793,160	142	21,199	60	0.70	86	-56	164	22	22
Chesterfield, Darlington, Dillon, Florence, Marion, Marlboro, Williamsburg	67,552	70,337	354,088	332,242	128	21,433	55	0.70	79	-49	83	-45	-45
Clarendon, Kershaw, Lee, Sumter	41,424	44,759	217,524	211,386	40	7,525	20	0.70	29	-11	37	-3	-3
Georgetown, Horry	115,219	157,534	427,023	488,558	147	28,954	91	0.70	130	-17	186	39	39
Aiken, Allendale, Bamberg, Barnwell, Calhoun, Orangeburg	64,021	69,334	307,503	298,548	74	7,466	20	0.70	29	-45	82	8	8
Beaufort, Hampton, Jasper	64,590	76,690	236,717	245,028	56	13,343	38	0.70	54	-2	91	35	35
Berkeley, Charleston, Colleton, Dorchester	139,572	170,748	852,478	917,499	172	34,260	101	0.70	144	-28	202	30	30
Statewide Totals	965,466	1,143,255	5,177,877	5,460,569	1,140	193,646	560	1.18078	798		1334		194

CRITICAL ACCESS HOSPITALS*
(Chapter 5)

Facility by Region

Region I

Abbeville Area Medical Center **1**

Region II

Edgefield County Healthcare

Region III

Williamsburg Regional Hospital **2**

Region IV

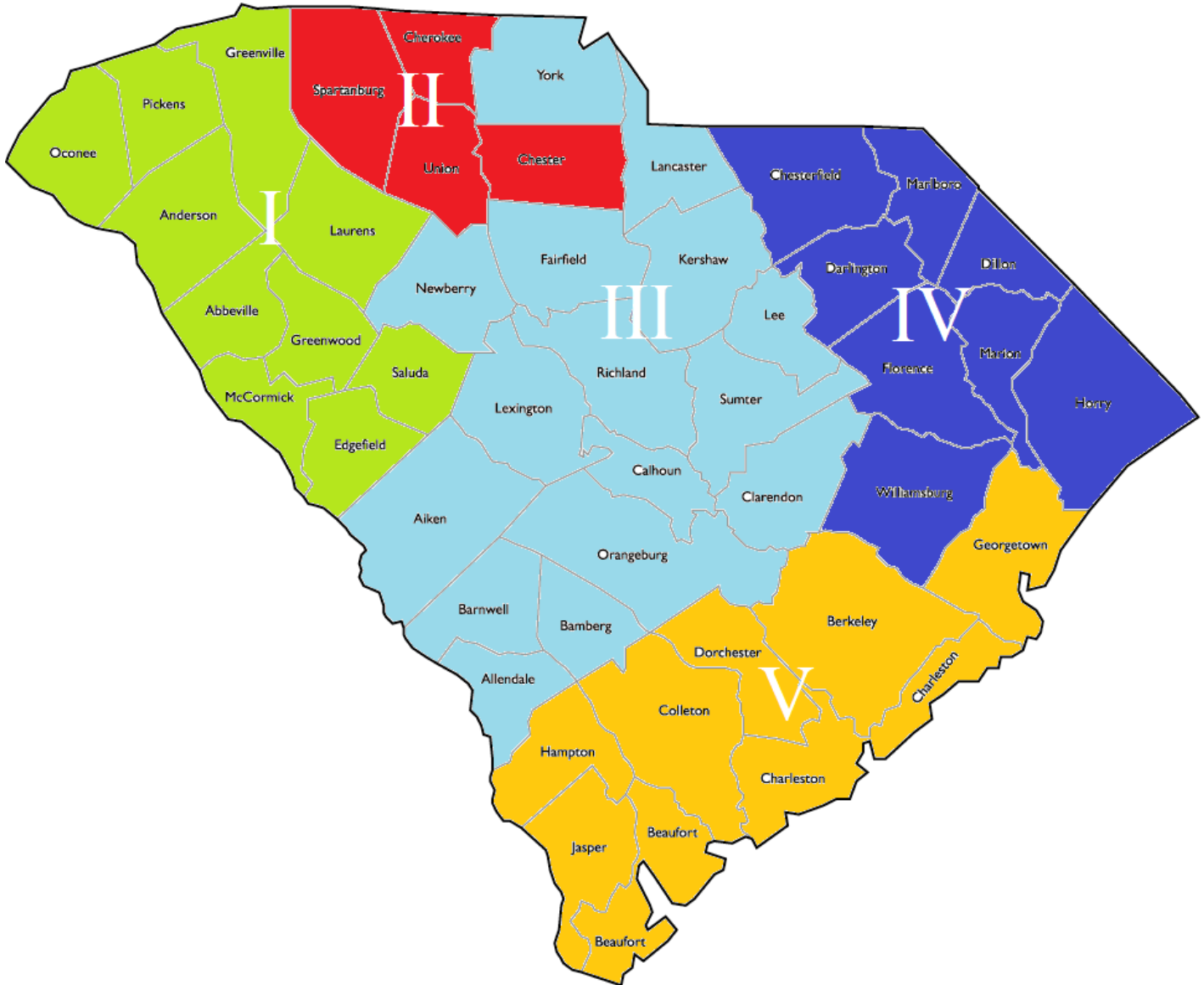
Allendale County Hospital

* Other facilities may potentially be eligible for CAH status.

1 Formerly Abbeville Memorial Hospital

2 (E-23-04) Facility Closed 12/17/2022

PERINATAL REGIONS MAP



**PERINATAL-CAPABLE FACILITIES
(Chapter 3)**

Facility by Service Level

Perinatal Region

Regional Perinatal Centers (RPCs)

Prisma Health Greenville Memorial Hospital	I
Spartanburg Medical Center	II
Prisma Health Richland Memorial	III
McLeod Regional Medical Center of the Pee Dee	IV
MUSC Medical Center (Level IV)	V

Subspecialty Perinatal Center (Level III Hospital)

Self Regional Healthcare	I
Prisma Health Baptist	III
Piedmont Medical Center	III

Specialty Perinatal Centers (Level II Hospitals) *

AnMed Health Women’s and Children’s Hospital	I
Baptist Easley Hospital	I
Prisma Health Greer Memorial Hospital **	I
Prisma Health Patewood **	I
St. Francis - Eastside	I
Aiken Regional Medical Centers	III
Lexington Medical Center	III
Regional Medical Center of Orangeburg & Calhoun Counties	III
MUSC Health Lancaster Medical Center	III
Prisma Health Baptist - Parkridge **	III
Prisma Health Tuomey	III
Coastal Carolina Hospital **	IV
MUSC Health Marion Medical Center	IV
Carolina Pines Regional Medical Center	IV
Conway Hospital	IV
Grand Strand Medical Center	IV
MUSC Health Florence Women's Pavillion	IV
Beaufort Memorial Hospital	V
Bon Secours - St. Francis Xavier Hospital	V
East Cooper Medical Center	V
Tidelands Georgetown Memorial Hospital	V
Summerville Medical Center	V
Trident Medical Center	V
Tidelands Waccamaw Community Hospital	V

** Removed from list*

Baptist Easley Hospital	I
MUSC Health Marion Medical Center	IV
Trident Medical Center	V

**** New Designation**

**INTENSIVE AND INTERMEDIATE BASSINETS
(Chapter 5)**

<u>Facility by Perinatal Region</u>	<u>Service Level</u>	<u>Existing Bassinets</u>	
		<u>Intensive</u>	<u>Intermediate</u>
Region I - Greenville Memorial			
Prisma Greenville Memorial Hospital	RPC	12	68
Self Regional Healthcare	Level III	7	7
AnMed Health Women's & Children's Hospital	Level II	0	13
St. Francis - Eastside	Level II	0	14
Prisma Health Greer Memorial Hospital	Level II	0	1
Prisma Health Patewood Hospital	Level II	0	4
Subtotal		19	107
Region II - Spartanburg Regional			
Spartanburg Medical Center	RPC	13	22
Subtotal		13	22
Region III - Palmetto Health Richland			
Prisma Health Richland	RPC	31	38
Prisma Health Baptist	Level III	8	23
Piedmont Medical Center	Level III	12	0
Aiken Regional Medical Centers	Level II	0	8
Lexington Medical Center	Level II	0	20
Regional Medical Center of Orangeburg & Calhoun Counties	Level II	0	0
MUSC Health Lancaster Medical Center	Level II	0	4
Prisma Health Tuomey	Level II	0	10
Prisma Health Baptist - Parkridge	Level II	0	2
Subtotal		51	105
Region IV - McLeod Regional			
McLeod Regional Medical Center of the Pee Dee	RPC	25	23
Carolina Pines Regional Medical Center	Level II	0	4
Conway Hospital	Level II	0	6
Grand Strand Medical Center	Level II	0	0
MUSC Health Florence Women's Pavillion	Level II	0	11
Subtotal		25	44
Region V - MUSC Medical			
MUSC Medical Center	RPC/Level IV	46	36
Beaufort Memorial Hospital	Level II	0	3
Bon Secours St. Francis Xavier Hospital	Level II	0	11
East Cooper Medical Center	Level II	0	10
Tidelands Georgetown Memorial Hospital	Level II	0	0
Summerville Medical Center	Level II	0	16
Tidelands Waccamaw Community Hospital	Level II	0	2
Subtotal		46	78
Totals		154	356

**UTILIZATION OF NEONATAL SPECIAL CARE UNITS
(Chapter 5)**

<u>Facility by Perinatal Region</u>	<u>Service Level</u>	2021						
		<u>Intensive Bassinets</u>	<u>Intensive Pt Days</u>	<u>Intermediate Bassinets</u>	<u>Intermediate Pt Days</u>	<u>Total Bassinets</u>	<u>Total Pt Days</u>	<u>Total Occupancy</u>
Region I - Greenville Memorial								
Prisma Greenville Memorial Hospital	RPC	12	0	68	0	80	25,736	88.1%
Self Regional Healthcare	Level III	7	632	7	1,032	14	1,664	32.6%
AnMed Health Women's & Children's Hospital	Level II	0	0	13	1,517	13	1,517	32.0%
St. Francis - Eastside	Level II	0	0	14	1,516	14	1,516	29.7%
Prisma Health Greer Memorial Hospital	Level II	0	0	1	44	1	44	12.1%
Prisma Health Patewood Hospital	Level II	0	0	4	337	4	337	23.1%
SUBTOTAL		19	632	107	4,446	126	30,814	67.0%
Region II - Spartanburg Regional								
Spartanburg Medical Center	RPC	13	3,921	22	4,798	35	8,719	68.3%
SUBTOTAL		13	3,921	22	4,798	35	8,719	68.3%
Region III - Palmetto Health Richland								
Prisma Health Richland	RPC	31	13,815	38	6,539	69	20,354	80.8%
Prisma Health Baptist	Level III	8	855	23	3,881	31	4,736	41.9%
Piedmont Medical Center	Level III	12	1,947	0	0	12	1,947	44.5%
Aiken Regional Medical Centers	Level II	0	0	8	200	8	200	6.8%
Lexington Medical Center	Level II	0	0	20	2,803	20	2,803	38.4%
Regional Medical Center of Orangeburg & Calhoun Counties	Level II	0	0	0	0	0	0	#DIV/0!
MUSC Health Lancaster Medical Center	Level II	0	0	4	264	4	264	18.1%
Prisma Health Tuomey	Level II	0	0	10	623	10	623	17.1%
Prisma Health Baptist Parkridge	Level II	0	0	2	319	2	319	43.7%
SUBTOTAL		51	16,617	105	14,629	156	31,246	54.9%

Region IV - McLeod Regional

McLeod Regional Medical Center of the Pee Dee	RPC	25	4,013	23	7,833	48	11,846	67.6%
Carolina Pines Regional Medical Center	Level II	0	0	4	275	4	275	18.8%
Conway Hospital	Level II	0	0	6	1,294	6	1,294	59.1%
Grand Strand Medical Center	Level II	0	0	0	0	0	0	#DIV/0!
MUSC Health Florence Women's Pavillion	Level II	0	0	11	994	11	994	24.8%
SUBTOTAL		25	4,013	44	10,396	69	14,409	57.2%

Region V - MUSC Medical

MUSC Medical Center	RPC/Level IV	34	12,692	48	12,730	82	25,422	84.9%
Beaufort Memorial Hospital	Level II	0	0	3	169	3	169	15.4%
Bon Secours-St. Francis Xavier Hospital	Level II	0	0	11	2,372	11	2,372	59.1%
East Cooper Medical Center	Level II	0	0	10	1,768	10	1,768	48.4%
Tidelands Georgetown Memorial Hospital	Level II	0	0	0	0	0	0	#DIV/0!
Summerville Medical Center	Level II	0	0	16	2,991	16	2,991	51.2%
Tidelands Waccamaw Community Hospital	Level II	0	0	2	726	2	726	99.5%
SUBTOTAL		34	12,692	90	20,756	124	33,448	73.9%

GRAND TOTAL		142	37,875	368	55,025	510	118,636	63.7%
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**NICU BED NEED
(Chapter 5)**

Counties by Perinatal Region	2019	2020	2021	3 YR	2019	2020	2021	3 YR	Average	2026	2026	Proj Birth Rate	Existing	Bed
	Births	Births	Births	Average	15-44 Female	15-44 Female	15-44 Female	15-44 Female	Birth Rate	15-44 Female	Projected	/ Average Birth	NICU Beds	Need
				Births	Population	Population	Population	Population		Population	Births	Rate		
Region I														
Abbeville	NR	NR	222	222	4,252	4,231	4,156	4,213		4,006				
Anderson	1,328	1,681	2,298	1,769	37,734	38,288	38,507	38,176		41,138				
Edgefield	NR	NR	176	176	4,194	4,227	2,989	3,803		3,907				
Greenville	8,795	9,011	6,615	8,140	104,551	106,540	106,663	105,918		115,088				
Greenwood	1,381	1,311	751	1,148	13,942	14,003	13,600	13,848		13,620				
Laurens	306	250	731	429	12,292	12,352	12,407	12,350		12,734				
McCormick	NR	NR	63	63	905	881	872	886		779				
Oconee	481	492	626	533	12,689	12,854	12,683	12,742		13,251				
Pickens	386	181	1,168	578	26,803	26,988	28,298	27,363		30,848				
Saluda			235	235	3,228	3,227	2,917	3,124		2,690				
Total	12,677	12,926	12,885	12,829	220,590	223,591	223,092	222,424	0.05768	238,061	13,731	1.070302	19	26
Region II														
Cherokee	NR	NR	657	657	10,875	10,877	10,494	10,749		10,262				
Chester	NR	NR	317	317	5,676	5,697	5,773	5,715		5,899				
Spartanburg	1,013	212	212	479	62,785	64,232	66,392	64,470		75,416				
Union	1,068	1,186	1,186	244	4,696	4,671	4,723	4,697		4,719				
Total	2,081	1,398	2,372	1,950	84,032	85,477	87,382	85,630	0.02278	96,296	2,193	1.124554	13	-6
Region III														
Aiken	1,068	1,186	1,933	1,396	31,239	31,483	31,064	31,262		31,634				
Allendale	NR	NR	63	63	1,293	1,265	1,210	1,256		1,070				
Bamberg	NR	NR	134	134	2,516	2,452	2,303	2,424		2,044				
Barnwell	NR	NR	245	245	3,697	3,643	3,558	3,633		3,264				
Calhoun	NR	NR	123	123	2,332	2,314	2,216	2,287		2,064				
Clarendon	332	277	292	300	5,337	5,303	4,836	5,159		4,275				
Fairfield	NR	NR	200	200	3,648	3,602	3,308	3,519		2,916				
Kershaw	NR	NR	743	743	11,879	12,035	11,797	11,904		12,246				
Lancaster	478	414	1,106	666	17,062	17,631	17,007	17,233		18,724				
Lee	NR	NR	150	150	2,763	2,728	2,635	2,709		2,403				
Lexington	3,425	3,927	3,389	3,580	57,484	58,418	56,904	57,602		59,382				
Newberry	246	240	416	301	6,597	6,591	6,431	6,540		6,342				
Orangeburg	799	NR	818	809	16,196	16,025	15,523	15,915		14,565				
Richland	6,417	5,184	4,601	5,401	96,318	96,698	96,277	96,431		96,975				
Sumter	1,275	1,278	1,343	1,299	20,815	20,781	20,534	20,710		20,251				
York	NR	NR	3,063	3,063	56,244	57,856	58,137	57,412		65,750				
Total	14,040	12,506	18,619	15,055	335,420	338,825	333,740	335,995	0.04481	343,905	15,409	1.023542	51	-1
Region IV														
Chesterfield			500	500	7,927	7,881	7,388	7,732		6,890				
Darlington	668	636	735	680	12,386	12,317	11,478	12,060		10,621				
Dillon	292	270	389	317	5,816	5,779	5,325	5,640		4,818				
Florence	2,946	2,715	1,615	2,425	27,205	27,044	26,787	27,012		26,025				
Horry	2,723	2,603	3,243	2,856	58,430	59,622	57,878	58,643		60,847				
Marion	NR	NR	322	322	5,554	5,488	5,157	5,400		4,624				
Marlboro	NR	NR	266	266	4,125	4,065	4,174	4,121		4,026				
Williamsburg	NR	NR	263	263	5,104	5,016	5,124	5,081		4,796				
Total	6,629	6,224	7,333	6,729	126,547	127,213	123,311	125,690	0.05353	122,647	6,566	0.975788	25	-4
Region V														
Beaufort	1,303	218	1,881	1,134	30,220	30,545	29,169	29,978		29,025				
Berkeley	134	679	2,875	1,229	45,980	47,318	47,436	46,911		53,684				
Charleston	7,493	7,038	5,033	6,521	86,625	87,695	86,095	86,805		87,103				
Colleton	316	340	455	370	6,590	6,608	6,732	6,643		7,006				
Dorchester	2,097	2,624	1,946	2,222	32,785	33,379	32,681	32,948		33,985				
Georgetown	798	831	488	706	9,326	9,282	9,238	9,282		8,975				
Hampton	NR	NR	195	195	3,208	3,155	3,195	3,186		3,049				
Jasper	686	755	387	609	4,915	4,984	4,663	4,854		4,622				
Total	12,827	12,485	13,260	12,857	219,649	222,966	219,209	220,608	0.05828	227,449	13,256	1.031010	34	9
Statewide	48,254	45,539	54,469	49,421	986,238	998,071	986,734	990,348		8828,358	51,156		142	24

GLOSSARY

TERM	DEFINITION	SOURCE
Affiliated Facilities	Two or more nursing homes or hospitals, whether owned, leased, or who have a formal legal relationship with a central organization and whose relationship has been established for reasons other than for transferring beds.	South Carolina Health Plan
Basic Perinatal Center with Well Newborn Nursery (Level I)	Level hospitals provide services for normal uncomplicated pregnancies. A full list of the requirements for a Level I Basic Perinatal Center with Well Newborn Nursery can be found at Regulation 61-16, Section 1306.A.	Regulation 61-16
Bed Capacity	Bed space designated exclusively for inpatient care, including space originally designed or remodeled for inpatient beds, even though temporarily not used for such purposes.	South Carolina Health Plan
Complex Neonatal Intensive Care Unit (Level IV)	In addition to complying with the requirements of Regulation 61-16, Sections 1306.A through 1306.C, Level IV hospitals shall include additional capabilities and considerable experience in the care of the most complex and critically ill newborn infants and have pediatric medical and surgical specialty consultants available 24-hours a day. A full list of the requirements for a Complex Neonatal Intensive Care Unit can be found at <u>Regulation 61-16, Section 1306.E</u> . A Level IV hospital need not act as a Regional Perinatal Center (RPC).	Regulation 61-16
Continuing Care Retirement Community Home Health Agency	<p>A licensed continuing care retirement community that also incorporates a skilled nursing facility may provide home health services.</p> <ol style="list-style-type: none"> a. The continuing care retirement furnishes or offers to furnish home health services only to residents who reside in living units provided by the continuing care retirement community pursuant to a continuing care contract; b. The continuing care retirement community maintains a current license and meets the applicable home health agency licensing standards; and c. Residents of the continuing care retirement community may choose to obtain home health services from other licensed home health agencies. 	South Carolina Health Plan

Critical Access Hospital (CAH)	Hospitals eligible for increased reimbursement without having to meet all criteria for full-service acute care hospitals. They are intended to provide essential health services to rural communities. In order to qualify as a CAH, a hospital must be located in a rural county and be located more than 35 miles from any other hospital or CAH (15 miles for areas with only secondary roads). It must be part of a rural health network with at least one full-service hospital. They can have a maximum of 25 licensed beds and the annual average length of stay must be less than 4 days. Emergency services must be available 24 hours a day.	South Carolina Health Plan
General Hospital	A facility with an organized medical staff to maintain and operate organized facilities and services to accommodate two or more nonrelated persons for the diagnosis, treatment and care of such persons overnight, and provides medical and surgical care of acute illness, injury or infirmity and may provide obstetrical care, and in which all diagnoses, treatment or care are administered by or performed under the direction of persons currently licensed to practice medicine, surgery, or osteopathy in the State of South Carolina.	S.C. Code of Regulations 61-16, Section 101(E)(1)
Health Care Facility	Acute care hospitals, psychiatric hospitals, alcohol and substance abuse hospitals, nursing homes, ambulatory surgical facilities, hospice facilities, radiation therapy facilities, rehabilitation facilities, residential treatment facilities for children and adolescents, intermediate care facilities for person with intellectual disability, narcotic (opioid) treatment programs, and any other facility for which Certificate of Need review is required by law.	S.C. Code Ann. Section 44-7-130(15)
Health Service	Clinically related, diagnostic, treatment, or rehabilitative services and includes alcohol, drug abuse, and mental health services.	S.C. Code Ann. Section 44-7-130(16)
Home Health Agency	A public, nonprofit, or proprietary organization, whether owned or operated by one or more persons or legal entities, which furnishes or offers to furnish home health services.	S.C. Code Ann. Section 44-69-20(4)
Home Health Service	Home health services means those items and services furnished to an individual by a home health agency, or by others under arrangement with the home health agency, on a visiting basis and except for (d) below, in a place of temporary or permanent residence used as the individual's home as follows: Part-time or intermittent skilled nursing care as ordered by a physician, an Advanced Practice Registered Nurse	S.C. Code Ann. 44-69-20(5)

(APRN), or a Physician Assistant (PA) and provided by or under the supervision of a registered nurse and at least one other service listed below: (a) physical, occupational, or speech therapy; (b) medical social services, home health aide services, and other therapeutic services; (c) medical supplies as indicated in the treatment plan and the use of medical appliances, to include durable medical equipment; and (d) any of the above items and services provided on an outpatient basis under arrangements made by the home health agency with a hospital, nursing home or rehabilitation center and the furnishing of which involves the use of equipment of such a nature that the items/services cannot readily be made available to the individual in his/her home, or which are furnished at one of the above facilities while the patient is there to receive such items or services. Transportation of the individual in connection with any such items or services is not included.

Hospital	<p>A facility that is organized and administered to provide overnight medical or surgical or nursing care for an illness, injury, or infirmity and must provide on-campus emergency services; that may provide obstetrical care; and in which all diagnoses, treatment, or care is administered by or under the direction of persons currently licensed to practice medicine, surgery, or osteopathy.</p> <p>Hospital may include a residential treatment facility for children, adolescents, or young adults in need of mental health treatment that is physically a part of a licensed psychiatric hospital. This definition does not include facilities that are licensed by the Department of Social Services. A residential treatment facility for children, adolescents, or young adults in need of mental health treatment that is physically part of a licensed psychiatric hospital is not required to provide on-campus emergency services.</p>	<p>S.C. Code Ann. Section 44-7-130(17)</p>
Hospital Bed	<p>A bed for an adult or child patient. Bassinets for the newborn in a maternity unit nursery, beds in labor rooms, recovery rooms, and other beds used exclusively for emergency purposes are not included in this definition.</p>	<p>South Carolina Health Plan</p>
Inpatient Psychiatric Services	<p>Those services provided to patients who are admitted to institutions for the evaluation, diagnosis, and treatment of mental, emotional, or behavioral disorders. Services may be provided in either psychiatric units of general hospitals or freestanding psychiatric hospitals.</p>	<p>South Carolina Health Plan</p>

Inpatient Treatment Facility	Short-term treatment service for persons who are in need of an organized intensive program of alcohol and/or drug rehabilitation, but who are without serious debilitating medical complications. These facilities may provide detoxification for their patients, as needed, in the inpatient treatment beds. These facilities are licensed either as a specialized hospital or as part of a hospital.	South Carolina Health Plan
Institutional Nursing Home	A nursing facility established within the jurisdiction of a larger non-medical institution that maintains and operates organized facilities and services to accommodate only residents of the institution. These facilities provide necessary services for retirement communities as established by church, fraternal, or other organizations. Such beds must serve only the residents of the housing complex and either be developed after the housing has been established or be developed as a part of a total housing construction program that has documented that the entire complex is one inseparable project.	South Carolina Health Plan
Long-Term Acute Care Hospital (LTACH)	Hospitals with an average Medicare inpatient length of stay of greater than 25 days, including all covered and non-covered days of stay of Medicare patients, They provide treatment to patients with complex medical conditions, such as strokes, cardiac care, ventilator dependency, wound care and post-surgical care.	South Carolina Health Plan
Nursing Homes	Facilities with an organized nursing staff to maintain and operate organized facilities and services to accommodate two or more unrelated persons over a period exceeding twenty-four hours which is operated either in connection with a hospital or as a freestanding facility for the express or implied purpose of providing intermediate or skilled nursing care for persons who are not in need of hospital care.	South Carolina Health Plan
Pediatric Home Health Agency	Due to the limited number of home health providers available to treat children 18 years or younger, an exception to the home health criteria may be made for a Certificate of Need for a Home Health Agency restricted to providing intermittent home health skilled nursing services to patients 18 years or younger. The license for the agency will be restricted to serving children 18 years or younger and will ensure access to necessary and appropriate intermittent home health skilled nursing services to these patients. Any such agencies are not counted in the county inventories for need projection purposes.	South Carolina Health Plan

Person	An individual, a trust or estate, a partnership, a corporation including an association, joint stock company, insurance company, and a health maintenance organization, a health care facility, a state, a political subdivision, or an instrumentality including a municipal corporation of a state, or any legal entity recognized by the State.	S.C. Code Ann. Section 44-7-130(21)
Regional Perinatal		Regulation
Center with Neonatal Intensive Care Unit (RPC)	In addition to complying with the requirements of Regulation 61-16, Sections 1306.A through 1306.C, RPCs provide consultative, outreach, and support services to other hospitals in the region. A full list of the requirements for a Regional Perinatal Center can be found at Regulation 61-16, Section 1306.D. No more than one Regional Perinatal Center will be approved in each perinatal region.	61-16
Specialty Perinatal Center with Special Care Nursery (Level II)	In addition to complying with the requirements of Regulation 61-16, Section 1306.A, Level II hospitals provide services for both normal and selected high-risk obstetrical and neonatal patients. A full list of the requirements for a Level II Specialty Perinatal Center can be found at Regulation 61-16, Section 1306.B.	Regulation 61-16
Subspecialty Perinatal Center with Neonatal Intensive Care Unit (Level III)	In addition to complying with the requirements of Regulation 61-16, Sections 1306.A and 1306.B, Level III hospitals provide all aspects of perinatal care, including intensive care and a range of continuously available, subspecialty consultation as recommended in the most recent edition of the <i>Guidelines for Perinatal Care</i> (GPC) by the American Academy of Pediatrics (AAP) and The American College of Obstetricians and Gynecologists. A full list of the requirements for a Level III Subspecialty Perinatal Center with Neonatal Intensive Care Unit can be found at Regulation 61-16, Section 1306.C.	Regulation 61-16
Swing-Bed	The Social Security Act (Section 1883(a)(1), [42 U.S.C. 1395tt]) permits certain small, rural hospitals to enter into a "Swing Bed" agreement, under which the hospital can use its beds to provide either acute or skilled nursing facility (SNF) care, as needed. The hospital must be located in a rural area and have fewer than 100 beds.	South Carolina Health Plan