



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

September 25, 2012

Mr. Jon D. Bandes
Authorized Representative for
South Broward Hospital District
d/b/a Memorial Regional Hospital
3501 Johnson Street
Hollywood, Florida 33021

RE: CON Action Number 10149

Dear Mr. Bandes:

Since the Agency did not receive a challenge to the Notice of Intent to Issue Certificate of Need Number 10149, the Notice of Intent to Issue becomes the final Agency action regarding Certificate of Need Number 10149.

Enclosed is Certificate of Need Number 10149 authorizing South Broward Hospital District to establish an adult heart transplantation program at Memorial Regional Hospital in Broward County, District 10, Organ Transplantation Service Area 4.

The issuance of this certificate does not resolve any licensure issues either pending or resulting from the issuance of this certificate.

Rule 59C-1.013(3), Florida Administrative Code, states that a report to the Agency must be filed annually after licensure or operation assessing compliance with any condition placed on this certificate of need. Any questions regarding such reporting should be directed to Mr. James B. McLemore of our staff at (850) 412-4401.

If there is any change in the project scope or cost, which would require certificate of need review, you are to notify this office immediately.

Sincerely,

Jeffrey N. Gregg, Director
Florida Center for Health Information and Policy Analysis

Enclosure

cc: Broward Regional Health Planning Council, Inc.
Bureau of Health Facility Regulation, Hospital & Outpatient Services Unit





STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION

CERTIFICATE OF NEED

Under the provisions of the "Health Facility and Services Development Act" (Sections 408.031-.045, Florida Statutes (Supp 1992), AND Chapter 59C-1, Florida Administrative Code), the Agency for Health Care Administration certifies the need for this project:

APPLICANT:
South Broward Hospital District
d/b/a Memorial Regional Hospital
3501 Johnson Street
Hollywood, Florida 33021

NUMBER: 10149
PROJECT COST: \$253,600
ISSUE DATE: September 25, 2012
TERMINATION DATE: March 24, 2014
REVISED TERMINATION DATE:

COUNTY: Broward

DISTRICT: 10

SUBDISTRICT: OTSA 4

PROJECT DESCRIPTION: Establish an adult heart transplantation program at Memorial Regional Hospital.

CONDITIONS: (1) Once certified for Medicare participation, the heart transplant program will comply at all times with Medicare conditions of participation, including the requirement of providing a minimum average annual volume of 10 heart transplants per year and meeting Medicare specified transplant patient survival standards; (2) Memorial Health System will discontinue operation of the heart transplant program if Medicare certification should lapse; and (3) Memorial Regional Hospital will provide a combined 12 percent of its total annual heart transplant program discharges to Medicaid and charity patients.

FORM 1793, APRIL 1993

DATE:

9/25/12