

**DIVISION OF HEALTH PLANNING
AND RESOURCE DEVELOPMENT
AUGUST 2014**

**CON REVIEW ASC-NIS-0614-008
MADISON PHYSICIAN SURGERY CENTER, LLC
D/B/A MADISON OUTPATIENT SURGERY CENTER
ESTABLISHMENT OF A MULTI-SPECIALTY AMBULAORY SURGERY CENTER
LOCATION: MADISON, MADISON COUNTY, MISSISSIPPI
CAPITAL EXPENDITURE: \$1,869,414**

STAFF ANALYSIS

I. PROJECT SUMMARY

A. APPLICANT INFORMATION

Madison Physician Surgery Center, LLC d/b/a Madison Outpatient Surgery Center ("MPSC") or ("Madison Physician") is a limited liability company, formed on May 21, 2013. The entity which has eight members and one director entered into a management agreement on March 17, 2014 with Medical Practice Solutions, Inc. of Jackson for the management of a single-specialty ambulatory surgery facility. The entity is in good standing with the State of Mississippi according to the Office of the Secretary of State.

B. PROJECT DESCRIPTION

Madison Physician Surgery Center, LLC, d/b/a Madison Outpatient Surgery Center proposes to establish a multi-specialty ambulatory surgery Center in space constructed by Mississippi Baptist Medical Center ("Baptist") for this purpose. Baptist received CON Nos. R-0511 and R-0511A to implement a multi-specialty ambulatory surgery center at the proposed location in 2001. The applicant and Baptist entered into a joint venture agreement to develop and operate the ambulatory surgery center ("ASC"). Baptist filed its final progress report on September 12, 2011, indicating that the project was 100% complete and that all final punch list/clean up items would be complete by September 25, 2011. The Department acknowledged receipt of the Final Progress Report on September 19, 2011 and closed the file. However, in July 2013, the Department determined that the Baptist Madison County Surgery Center was never licensed nor did it become operational after the completion report was filed.

On March 11, 2014, the Mississippi State Department of Health ("MSDH") authorized a single-specialty ASC in the structure previously approved for the Baptist CON. The applicant currently operates a single-specialty ASC and performs orthopaedic surgery procedures. The applicant desires to operate its orthopaedic practice by providing a full-range of ambulatory orthopaedic surgical procedures, including but not limited to total joint

replacements and treatment of back and spinal conditions. According to the applicant such procedures, on occasion, require treatment by physicians and other medical professionals in fields beyond traditional orthopaedic medicine. The applicant also proposes to make the facility available to physicians in other fields for surgical procedures.

The applicant does not expect to obligate any new capital for the project. If approved, the applicant expects to add additional specialties within one year of final approval.

The applicant received site approval for the proposed project from the Mississippi State Department of Health, Division of Licensure and Certification.

II. TYPE OF REVIEW REQUIRED

The Mississippi State Department of Health reviews applications for the establishment of multi-specialty ambulatory surgical services under the applicable statutory requirements of Sections 41-7-173, 41-7-191 (1)(d)(xi), 41-7-193 and 41-7-195, Mississippi Code of 1972, as amended, and duly adopted rules, procedures, plans, criteria, and standards of the Mississippi State Department of Health.

In accordance with Section 41-7-197(2) of the Mississippi Code of 1972 Annotated, as amended, any affected person may request a public hearing on this project within 20 days of publication of the staff analysis. The opportunity to request a hearing expires September 10, 2014.

III. CONFORMANCE WITH THE STATE PLAN AND OTHER ADOPTED CRITERIA AND STANDARDS

A. State Health Plan (SHP)

The *Plan* gives guidelines for all health planning in Mississippi. The *Plan* states that: Mississippi's planning and health regulatory activities have the following purposes:

- To prevent unnecessary duplication of health resources;
- To provide cost containment;
- To improve the health of Mississippi residents; and
- To increase the accessibility, acceptability, continuity, and quality of health services.

The applicant maintains that the project is consistent with the above stated goals of health planning.

In addition, the *FY 2014 Mississippi State Health Plan (MSHP)* contains policy statements as well as criteria and standards for the establishment of multi-specialty ambulatory surgery services.

According to the *FY 2014 MSHP*, the MSDH shall consider the utilization of existing services and the presence of valid CONs for services within a given ASPA when reviewing CON applications. In addition, the *Plan* states that the optimum capacity of an ambulatory surgery facility is 800 surgeries per operating room per year. Within ASPA 5, wherein the proposed facility will be located, there are five existing free-standing ambulatory surgery centers and 16 hospital-based facilities, for a total of 21 ambulatory surgery facilities. These 21 facilities had a total of 164 operating rooms/suites in FY 2013 and performed a total of 115,999 procedures for an average of 707.31 procedures per operating room/suite (*Applications for Renewal of Hospital License FY 2013 and survey of individual free-standing ASCs October 1, 2012 – September 30, 2013*).

SHP Criterion 1 - Need

In order to show need for ambulatory surgery services the applicant shall demonstrate that the proposed facility shall perform a minimum average of 1,000 surgeries per operating room per year. Madison Physician projects that it will perform 4,056 surgeries the first year, 4,308 the second year, and 4,392 the third year of operation.

SHP Criterion 2 - Minimum Population Base

An applicant proposing the establishment of ambulatory surgery surgeries must document that the proposed ASPA has a population base of approximately 60,000 within 30 minutes travel time.

Madison Physician Surgery Center, LLC submitted the following table to show compliance with this criterion. According to the applicant, each of the below cities located within ASPA 5 is within 30 minutes normal drive time or 25 miles of the proposed facility.

| City | 2010 Census | 2012 Estimate |
|--------------|----------------|----------------|
| Brandon | 21,622 | 22,160 |
| Canton | 13,189 | 13,318 |
| Clinton | 25,215 | 25,752 |
| Flowood | 7,823 | 8,154 |
| Jackson | 173,513 | 175,437 |
| Madison | 24,053 | 24,841 |
| Ridgeland | 24,053 | 24,258 |
| Total | 289,564 | 293,820 |

SHP Criterion 3 – Utilization of Existing Facilities

An applicant proposing to offer ambulatory surgery services shall document that the existing facilities in the ASPA have been utilized for a minimum of 800 surgeries per operating room per year for the most recent 12-month reporting period as reflected in data supplied to and/or verified by the Mississippi State Department of Health.

The applicant asserts that freestanding ASCs are the “existing facilities” that should be taken into account when considering this criterion and attempts to show compliance based on freestanding ASCs only. However, ASPA 5 contains 16 hospital-affiliated ambulatory surgery centers. These facilities performed a total of 88,850 surgeries in FY 2012 which includes 48,063 ambulatory surgeries.

Staff contends that the need for additional ambulatory surgery centers cannot be established without the consideration of **ALL** ambulatory surgeries performed within the ASPA. Policy Statement 7 of the FY 2014 MSHP states that the MSDH shall not issue a CON for the establishment or expansion of an additional facility(ies) unless the existing facilities within the ASPA have performed in aggregate at least 800 surgeries per operating room per year for the most recent 12-month reporting period.

According to the *FY 2014 MSHP*, ASPA 5 had 21 ambulatory surgery facilities in FY 2012 which performed 113,977 procedures utilizing 151 operating rooms/suites for an average of 754.81 surgeries per operating room/suite. Based on updated information for FY 2013, the most recent 12-month period, these 21 facilities performed a total of 115,999 procedures utilizing 164 operating rooms/suites, for an average of 707.31 procedures per operating room/suite (See Attachment 2).

SHP Criterion 4 – Range of Services

The applicant proposes to operate its orthopaedic practice by providing a full-range of ambulatory orthopaedic surgical procedures, including but not limited to total joint replacements and treatment of back and spine conditions. According to the applicant, these procedures require treatment by physicians and other medical professionals in fields beyond traditional orthopaedic medicine.

In addition, the applicant proposes to provide other types of ambulatory surgeries in the future at this location through arrangements with physicians in other medical specialties. However, initially the applicant's practice will focus on general orthopaedic surgical procedures performed in conjunction with specialists in other medical fields.

SHP Criterion 5 – Economic Viability

The applicant indicates that the project will be economically viable within two years of initiation. Table 5C – Income Statement with Project, contained in the application, indicates net income of \$761,497 the first year, \$1,123,050 the second year and \$1,122,008 the third year after initiation of the project.

SHP Criterion 6 – Physician Support

The application contains letters from five physicians in support of the project.

SHP Criterion 7 – Staff Residency

According to the applicant, all of the physician principals for the proposed facility live within 25 miles of the facility as required by this criterion.

SHP Criterion 8 – Hospital-Support Agreement

The application contains a copy of a proposed transfer agreement between Mississippi Baptist Medical Center, Inc. and Madison Physician Surgery Center, LLC. In addition, it contains a copy of protocols to provide follow-up services to patients. The applicant states that if the proposed project is approved, this information will be updated to cover all medical specialties that use the facility.

SHP Criterion 9 – Indigent/Charity Care

Madison Physicians affirmed that it will provide a reasonable amount of indigent/charity care. The applicant projects that approximately \$588,346 of revenues will be from Medicaid, constituting approximately 3% of all gross patient revenues the first year. Indigent/charity care is projected to amount to an additional \$647,180 care the first year or approximately 3.3%.

The applicant submits that in addition to these forms of indigent/charity care, physicians provide a significant amount of free and uncompensated care for young athletes engaged in school sports.

B. General Review (GR) Criteria

Chapter 8 of the *Mississippi Certificate of Need Review Manual, 2011 Revision*, addresses general criteria by which all CON applications are reviewed.

GR Criterion 1 - State Health Plan (SHP)

The *State Health Plan* contains policy statements, criteria, and standards regarding CON applications for ambulatory surgery services.

The applicant maintains that only freestanding ASCs should be counted in considering the need for free-standing multi-specialty ambulatory surgery centers.

However, staff contends that the need for multi-specialty ambulatory surgery facilities/services cannot be established without considering **ALL** facilities in the area that offer ambulatory surgery services. The application is not in compliance with the *FY 2014 Mississippi State Health Plan*.

GR Criterion 2 - Long Range Plan

The applicant states that its long range plans include broadening the range of medical services that can be supplied to its orthopaedic patients in an ambulatory surgery setting; however, as a single-specialty facility Madison Physician Surgery Center is strictly limited to the practice of orthopaedic medicine. In addition, the project began as a joint venture between the applicant and Mississippi Baptist Medical Center. After the CON lapsed, the effort to open a multi-specialty ASC at the site was assumed by Madison Physician.

GR Criterion 3- Availability of Alternatives

The applicant indicated that the original project was intended as a multi-specialty facility. Madison Physician states that the single-specialty option it was forced to pursue (when the original CON lapsed) is a less efficient alternative. The applicant further states that while it is able to deliver the highest-quality orthopaedic services at this location, its ability to coordinate care with other medical professionals is limited by the fact the applicant's physicians practice must be operated separately from those of other medical professionals.

GR Criterion 4 - Economic Viability

A financial feasibility study, prepared and signed by the financial officer of Madison Physician and contained in the application, indicates that the project is economically viable.

According to the applicant, the charges for services to be rendered at the multi-specialty facility are based on rates currently in use at the single-specialty facility.

Madison Physician believes that the project should not negatively affect the cost of health care or Medicaid. In addition, since no new capital must be invested to convert the single-specialty ASC to a multi-specialty ASC, the applicant states its expenses will not increase.

GR Criterion 5 - Need for the Project

The applicant affirms that Madison Physician treats both Medicare and Medicaid patients and will continue to do so if granted authority to operate a multi-specialty facility. The applicant projects that approximately \$588,346 of revenues will be from Medicaid, constituting approximately 3% of all gross patient revenues the first year. Indigent/charity care is projected to amount to an additional \$647,180 care the first year, or approximately 3.3%.

Madison Physician submits that it does not seek to create additional ambulatory surgical capacity in the planning area as it already operates a single-specialty facility at this location consisting of four (4) operating rooms. The applicant states that it seeks multi-specialty capacity for the existing operating rooms to offer medical services to be provided in conjunction with other medical specialties in a single continuum of care under a single roof.

The applicant submits that the five (5) freestanding ambulatory surgery centers in ASPA 5 had a combined total of 25,127 surgeries in 2012, performed in 24 operating rooms/suites. The numbers equate to 1,046 surgeries per operating room per year for the most recent 12-month reporting period. The applicant further indicates that there has been a steady overall growth in the use of freestanding ASC capacity in the planning area and that there should be no adverse effect on existing multi-specialty facilities.

However, the applicant overlooks the fact that there are 16 hospital affiliated ambulatory surgery facilities in ASPA 5. These facilities performed a total of 49,056 ambulatory surgeries in FY 2011, 48,063 in FY 2012, and 48,007 in FY 2013, indicating a downward trend in ambulatory surgeries (*FY 2013 MSHP, FY 2014 MSHP, and Applications for Renewal of Hospital License FY 2013*).

Policy Statement 7 of the FY 2014 MSHP states that the MSDH shall not issue a CON for the establishment or expansion of an additional facility(ies) unless the existing facilities within the ASPA have performed in aggregate at least 800 surgeries per operating room per year for the most recent 12-month reporting period. According to the *FY 2014 MSHP*, ASPA 5 had 21 ambulatory surgery facilities in FY 2012 which performed 113,977 procedures utilizing 151 operating rooms/suites for an average of 754.81 surgeries per operating room/suite. Based on updated information for FY 2013, the most recent 12-month period, these 22 facilities performed a total of 115,999 procedures utilizing 164 operating rooms/suites, for an average of 707.31 procedures per operating room/suite.

In addition, surgeries performed in single-specialty ambulatory surgery facilities are not considered "institutional health services" and are therefore exempt from the CON process (*Attorney General's Opinion March 22, 1994*). Likewise, surgeries performed at single-specialty ambulatory surgery facilities are not considered when determining the

need for additional multi-specialty ambulatory surgery capacity. Therefore, if approved, this project will add four (4) additional operating rooms to ASPA 5. Staff contends that the project will have an adverse impact on the existing multi-specialty facilities in ASPA 5.

The application contains eight (8) letters of support for the project.

GR Criterion 6- Accessibility

The applicant affirms that all residents of the health planning service area, including Medicaid recipients, charity/medically indigent patients, racial and ethnic minorities, women, handicapped persons and the elderly have access to the services of the existing facility and will have access to the proposed facilities/services.

Madison Physician projects the following percentage of gross patient revenue and actual dollar amount of health care that will be provided to medically indigent and charity care patients for the two years following completion of the project:

| Gross Patient Revenue | | | | |
|------------------------------|------------------------|------------------|-------------------------|-------------------|
| | Medically Indigent (%) | Charity Care (%) | Medically Indigent (\$) | Charity Care (\$) |
| Projected Year 1 | .30% | .70% | \$72,391.33 | \$181,511.42 |
| Projected Year 2 | .25% | .75% | \$64,925.51 | \$194,476.52 |

The applicant projects that during its first year of operation approximately 38.5% of its combined revenue will come from Medicare, Medicaid, and medically indigent patients.

GR Criterion 7- Information Requirement

The applicant affirms that MPSC will record and maintain the information required by this criterion and shall make the data available to the Mississippi Department of Health within fifteen (15) business days of request.

GR Criterion 8 - Relationship to Existing Health Care System

The applicant asserts that there are five (5) freestanding multi-specialty ASCs in ASPA 5. All but one of these facilities is located in Jackson, with none located in Madison County. The applicant argues that its facility will be the closest facility to the northern part of ASPA 5, an area that includes Holmes, Attala, Leake, Yazoo, and Sharkey counties.

As stated earlier, ASPA 5 had 21 ambulatory surgery facilities in FY 2012 which performed 113,977 procedures utilizing 151 operating rooms/suites for an average of 754.81 surgeries per operating room/suite. Based on

updated information for FY 2013, the most recent 12-month period, these 21 facilities performed a total of 115,999 procedures utilizing 164 operating rooms/suites, for an average of 707.31 procedures per operating room/suite.

The applicant has a transfer agreement with Mississippi Baptist Medical Center for the single-specialty facility. It states that it will enter into a new agreement for the multi-specialty facility if approved.

The Department received two letters of opposition to the project from Central Mississippi Medical Center, River Region Health System, Madison River Oaks Medical Center, Crossgates River Oaks Hospital, River Oaks Hospital, and Woman's Hospital; and St. Dominic-Jackson Memorial Hospital.

GR Criterion 9 - Availability of Resources

The applicant asserts that no new personnel will be required for the project as it already operates a single-specialty facility. The application lists eight (8) physician principals and one director. Applicant states that other medical professionals, including pain management specialists and others, will be recruited to provide additional general and orthopaedic surgical services if the application is approved.

GR Criterion 10 - Relationship to Ancillary or Support Services

The applicant asserts all support and ancillary services for a free-standing multi-specialty ASC are already in place.

GR Criterion 11- Health Professional Training Programs

The applicant states the Sports Medicine and Arthroscopy Fellowship at Mississippi Sports Medicine and Orthopaedic Center (where Applicant's principals also practice) is an ACGME accredited 12-month program with five (5) ACGME approved fellowship positions well balanced between upper, lower extremity surgical rotations. They further state that providing the fellowship program with hands on experience in a state of the art center will better prepare each fellow for the near future.

GR Criterion 14 - Construction Projects

The applicant contends no new construction or renovation is associated with the proposed project.

GR Criterion 16 - Quality of Care

Madison Physician submits that its surgeons are also affiliated with Mississippi Sports Medicine and Orthopaedic Center ("MSMOC") and all of MSMOC's surgeons are fellowship trained and 11 of 13 are board certified. In addition, two are board eligible and will receive their board certifications by October 2015.

IV. FINANCIAL FEASIBILITY

A. Capital Expenditure Summary

The total estimated capital expenditure is allocated as follows:

| | Item | Cost (\$) | Percent (%) of Total* |
|----|---|---------------------------|-----------------------|
| a. | Construction Cost -- New | 0 | 0 |
| b. | Construction Cost -- Renovation | 0 | 0 |
| c. | Capital Improvements | 591,138 | 32.00 |
| d. | Total Fixed Equipment Cost | 1,095,981 | 59.00 |
| e. | Total Non-Fixed Equipment Cost | 132,295 | 7.00 |
| f. | Land Cost | 0 | 0 |
| g. | Site Preparation Cost | 0 | 0 |
| h. | Fees (Architectural, Consultant, etc.) | 0 | 0 |
| i. | Contingency Reserve | 00 | 0 |
| j. | Legal and accounting fees | 25,000 | 1.00 |
| k. | Other | <u>25,000</u> | <u>1.00</u> |
| | Total Proposed Capital Expenditure | <u>\$1,869,414</u> | <u>100.00</u> |

*Percentages do not compute due to rounding.

B. Method of Financing

Madison Physician does not anticipate any additional capital expenditure. According to the applicant, the above capital expenditure was obligated for the single-specialty facility.

C. Effects on Operating Costs

The applicant's projections of gross revenues for the first, second, and third year of operation, expenses, and net income are shown in Attachment 1. Utilization, cost, and charges are also included in the applicant's Three-Year Projected Operating Statement (see Attachment 1).

D. Cost to Medicaid/Medicare

Madison Physician Surgery Center, LLC provides the following revenue source projections for each payor category listed below:

| Payor Mix | Utilization Percentage (%) | First Year Revenue (\$) |
|--------------|----------------------------|-------------------------|
| Medicare | 34 | \$ 6,687,527 |
| Medicaid | 3 | 588,346 |
| Commercial | 51 | 10,060,708 |
| Self Pay | 1 | 78,446 |
| Charity Care | 3 | 647,180 |
| Other | 8 | 1,549,310 |
| Total | 100 | \$19,611,517 |

V. RECOMMENDATION OF OTHER AFFECTED AGENCIES

The Division of Medicaid was provided a copy of this application for comments, Effective September 1, 2012, the Division of Medicaid changed the methodology by which it reimburses outpatient services so that the cost incurred, subsequent to that date, will no longer affect outpatient payments.

VI. CONCLUSION AND RECOMMENDATION

This project is not in substantial compliance with the policy statements, criteria and standards of the *2014 Mississippi State Health Plan*; Chapter 8 of the *Mississippi Certificate of Need Review Manual, 2011 Revision*; and all adopted rules, procedures, and plans of the Mississippi State Department of Health.

The applicant submits that the five (5) freestanding ambulatory surgery centers in ASPA 5 had a combined total of 25,127 surgeries in 2012, performed in 24 operating rooms/suites. This equates to 1,046 surgeries per operating room per year for the most recent 12-month reporting period. The applicant further indicates that there has been a steady overall growth in the use of freestanding ASC capacity in the planning area, and that there should be no adverse effect on existing multi-specialty facilities there.

However, the applicant overlooks the fact that there are 16 hospital affiliated ambulatory surgery facilities in ASPA 5. These facilities performed a total of 49,056 ambulatory surgeries in FY 2011, 48,063 in FY 2012, and 48,007 in FY 2013, indicating a downward trend in ambulatory surgeries (*FY 2013 MSHP, FY 2014 MSHP, and Applications for Renewal of Hospital License FY 2013*). Staff contends that the need for additional ambulatory surgery capacity cannot be determined without consideration of **ALL** ambulatory surgeries performed in the Ambulatory Surgery Planning Area.

Policy Statement 7 of the FY 2014 MSHP states that the MSDH shall not issue a CON for the establishment or expansion of an additional facility(ies) unless the existing facilities within the ASPA have performed in aggregate at least 800 surgeries per operating room per year for the most recent 12-month reporting period. According to the FY 2014 MSHP, ASPA 5 had 21 ambulatory surgery facilities in FY 2012 which performed 113,977 procedures utilizing 151 operating

rooms/suites for an average of 754.81 surgeries per operating room/suite. Based on updated information for FY 2013, the most recent 12-month period, these 21 facilities performed a total of 115,999 surgeries utilizing 164 operating rooms/suites, for an average of 707.31 surgeries per operating room/suite.

Consequently, the Division of Health Planning and Resource Development recommends **disapproval** of this application submitted by Madison Physician Surgery Center, LLC for the establishment of a multi-specialty ambulatory surgery center.

Attachment 1

Madison Physician Surgery Center, LLC Establishment of Ambulatory Surgery Center

Three-Year Projected Operating Statement (With Project)

| | Year 1 | Year 2 | Year 3 |
|------------------------------|----------------------|----------------------|----------------------|
| Revenue | | | |
| Patient Revenue: | | | |
| Inpatient | \$ | \$ | \$ |
| Outpatient | 19,611,517 | 21,053,265 | 21,206,653 |
| Gross Patient Revenue | \$ 19,611,517 | \$ 21,053,265 | \$ 21,206,653 |
| Charity Care | 647,180 | 694,758 | 699,820 |
| Deductions from Revenue | 11,710,068 | 12,490,364 | 12,559,931 |
| Net Patient Revenue | \$ 7,254,268 | \$ 7,868,143 | \$ 7,946,902 |
| Expenses | | | |
| Operating Expenses: | | | |
| Salaries | \$ 1,879,124 | \$ 1,896,175 | \$ 1,997,927 |
| Benefits | 256,244 | 258,569 | 272,445 |
| Supplies | 2,555,206 | 2,737,360 | 2,713,255 |
| Services | 323,699 | 344,900 | 346,121 |
| Lease | 522,276 | 540,420 | 540,420 |
| Depreciation | 390,904 | 399,237 | 407,571 |
| Interest | 97,857 | 80,714 | 80,714 |
| Other | 467,461 | 487,717 | 466,441 |
| Total Expenses | \$ 6,492,771 | \$ 6,745,092 | \$ 6,824,894 |
| Net Income (Loss) | \$ 761,497 | \$ 1,123,051 | \$ 1,122,008 |
| Assumptions | | | |
| Inpatient days* | NA | NA | NA |
| Outpatient days* | NA | NA | NA |
| Procedures | 4,056 | 4,308 | 4,392 |
| Charge per outpatient day | NA | NA | NA |
| Charge per inpatient day | \$ | \$ | \$ |
| Charge per procedure | \$4,835 | \$4,887 | \$4,828 |
| Cost per inpatient day | NA | NA | NA |
| Cost per outpatient day | NA | NA | NA |
| Cost per procedure | \$1,601 | \$1,566 | \$1,554 |

Attachment 2

**FY 2013 Utilization Data of Hospital-Affiliated
 Ambulatory Surgery Data and
 Freestanding Ambulatory Surgery Data
 By County for ASPA 5**

Hospital-Affiliated Ambulatory Surgery Data

| ASPA | Total # of Surgeries | # of Ambulatory Surgeries | Ambulatory Surgeries/Total Surgeries (%) | # of Operating Rooms/Suites | Avg. # of Surgeries per Day/Suite¹ |
|-------------|-----------------------------|----------------------------------|---|------------------------------------|--|
| 5 | 85,982 | 48,007 | 55.8 | 140 | 2.46 |

¹Based on 250 working days per year

Source: Applications for Renewal of Hospital License for CY 2013 and FY 2014 Annual Hospital Report

Freestanding Multi-Specialty Ambulatory Surgery Data

| County/ASPA | Total # of ASCs | # of Ambulatory Surgeries | # of Operating Rooms/Suites | Avg. # of Surgeries per Day/Suite¹ |
|--------------------|------------------------|----------------------------------|------------------------------------|--|
| Hinds (5) | 4 | 25,816 | 19 | 5.43 |
| Rankin (5) | 1 | 4,201 | 5 | 3.36 |

¹Based on 250 working days per year

Source: Survey of individual freestanding ambulatory surgery centers for period October 1, 2012 – September 30, 2013