



# COMMONWEALTH of VIRGINIA

Department of Health

Office of Licensure and Certification

M. Norman Oliver, MD, MA  
State Health Commissioner

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Henrico, Virginia 23233-1485  
FAX: (804) 527-4502

July 20, 2020

Mr. George P. Phillips  
Consultant  
608 Tyson Road  
Virginia Beach, Virginia 23462

RE: **COPN Request No. VA-8499**  
**Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center**  
**Add one CT scanner**

Dear Mr. Phillips:

For your consideration, I enclose the Division of Certificate of Public Need (DCOPN) report and recommendation on the above referenced project. DCOPN is recommending **conditional approval** of this application for the reasons listed in the attached staff report.

If Riverside Hospital, Inc. is willing to accept the recommendation for conditional approval of this project, please provide documentation of this acceptance no later than **July 24, 2020**. If not willing to accept, before the State Health Commissioner makes his decision on this project, the Department will convene an informal-fact-finding conference (IFFC) pursuant to Title 2.2 of the Code of Virginia. This IFFC has been scheduled for Thursday, July 30, 2020 beginning at 1:00 p.m. in Training Room 2 of the Perimeter Center located at 9960 Mayland Drive in Henrico, Virginia. A copy of the procedures for conduct at IFFCs may be found at <http://www.vdh.virginia.gov/OLC/copn/>

Persons wishing to participate in an IFFC have four days from the date of this letter to submit written notification to the State Health Commissioner, DCOPN and the applicant stating a factual basis for good cause standing. If no person has submitted written notification stating grounds and providing a factual basis for good cause standing and Riverside Hospital, Inc. accepts the conditional approval, DCOPN will then notify you of the cancellation of the scheduled IFFC. DCOPN would then anticipate action by the State Health Commissioner within a few weeks of transmission.

DIRECTOR  
(804) 367-2102

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(804) 367-2104

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Should you have questions or need further clarification of this report and/or its recommendations, please feel free to call me at (804) 367-1889 or email me at [Erik.Bodin@VDH.Virginia.Gov](mailto:Erik.Bodin@VDH.Virginia.Gov).

Sincerely,

A handwritten signature in blue ink, appearing to read 'Erik Bodin', with a stylized flourish at the end.

Erik Bodin, Director  
Division of Certificate of Public Need

Enclosures

cc: Douglas R. Harris, J.D., Office of Adjudication, Virginia Department of Health

**VIRGINIA DEPARTMENT OF HEALTH**  
**Office of Licensure and Certification**

**Division of Certificate of Public Need**

**Staff Analysis**

July 20, 2020

**COPN Request No. VA-8499**

Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center  
Newport News, Virginia  
Add one CT scanner

**Applicant**

Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center (Riverside) is a Virginia nonstock 501(c)(3) corporation organized in 1982. Riverside is located in Newport News, Virginia, which is located in Planning District (PD) 21, Health Planning Region (HPR) V.

**Background**

Riverside is a 576-bed acute care community hospital that provides a comprehensive array of inpatient and outpatient services, including but not limited to cardiology, behavioral medicine services, surgery, neonatal, oncology, women's services, and pediatrics. There are currently 17 COPN authorized fixed computed tomography (CT) scanners in PD 21 (Table 1).

**Table 1. PD 21 Fixed CT Units: 2018**

<b>Facility</b>	<b>Number of Scanners</b>	<b>Number of Scans</b>	<b>Utilization Rate</b>
Bon Secours Mary Immaculate Hospital	1	10,633	143.7%
Hampton Roads ENT - Allergy (Hampton Roads Otolaryngology Associates)	1	643	8.7%
Riverside Diagnostic & Breast Imaging Center (Riverside Diagnostic Center - Oyster Point)	1	3,289	44.4%
Riverside Diagnostic Center - Williamsburg	1	2,175	29.4%
Riverside Doctors' Hospital Williamsburg	1	5,504	74.4%
Riverside Regional Medical Center	2	31,706	214.2%
Riverside Regional Medical Center MRI Center - Hampton	1	2,364	31.9%
Sentara Careplex Hospital	3	19,338	87.1%
Sentara Port Warwick II	1	5,793	78.3%
Sentara Williamsburg Regional Medical Center	3	16,782	75.6%
TPMG Imaging Center - Newport News	1	3,042	41.1%
TPMG Imaging Center - Williamsburg	1	1,282	17.3%
<b>2018 Total and Average</b>	<b>17</b>	<b>102,551</b>	<b>81.5%</b>

Source: VHI & DCOPN Records

**Proposed Project**

Riverside proposes to add one CT scanner to be located in their Emergency Department. In support of their application, Riverside claims an institutional need for the new CT scanner and notes the extremely high utilization at Riverside. The total capital and financing costs for the project are \$1,935,750 (Table 2). The project will be paid for by the use of Riverside’s accumulated reserves.

**Table 2. Capital and Financing Costs**

Direct Construction Costs	\$535,750
Equipment Not Included in Construction Contract	\$1,400,000
<b>TOTAL Capital and Financing Costs</b>	<b>\$1,935,750</b>

Source: COPN Request No. VA-8499

**Project Definitions**

Section 32.1-102.1:3 of the Code of Virginia defines a project, in part as, “The addition by an existing medical care facility described in subsection A of any new medical equipment for the provision of... computed tomographic (CT) scanning...” A medical care facility includes “[a]ny facility licensed as a hospital, as defined in § 32.1-123...”

**Required Considerations -- § 32.1-102.3, of the Code of Virginia**

In determining whether a public need exists for a proposed project, the following factors shall be taken into account when applicable.

- 1. The extent to which the proposed project will provide or increase access to health care services for people in the area to be served and the effects that the proposed project will have on access to health care services in areas having distinct and unique geographic, socioeconomic, cultural, transportation, and other barriers to access to health care;**

The applicant proposes to expand CT services at Riverside through the addition of one CT scanner. Currently, CT services exist at 12 locations in PD 21. As Riverside currently offers CT scanning services, approval of the proposed project is unlikely to increase geographic access to CT services in PD 21. Approval of the project would increase access to patients at Riverside by reducing any delays in patients receiving scan that results from the extremely high utilization of the existing CT scanners. Given the extremely high utilization at Riverside, approval of the project is highly unlikely to have a detrimental effect on existing diagnostic CT service providers.

Geographically, Riverside is located on U.S. Route 17, which connects to Interstate 64 approximately 2.6 miles from the facility and SR 143 approximately 1 mile from the facility. Public transportation is available on campus and connects to all parts of the surrounding area.

DCOPN is not aware of any geographic, socioeconomic, cultural, or transportation barriers to access to care

- 2. The extent to which the proposed project will meet the needs of people in the area to be served, as demonstrated by each of the following:**

**(i) the level of community support for the proposed project demonstrated by people, businesses, and governmental leaders representing the area to be served;**

DCOPN received letters of support for the proposed project from three physicians associated with Riverside. Collectively, these letters articulated the high utilization of the two existing scanners at Riverside. Additionally, the letters stated that over half of the CT scans originated in the Emergency Department and that approval of a third CT scanner that would be placed in the Emergency Department would increase their efficiency in treating patients.

#### Public Hearing

DCOPN conducted the required public hearing on July 6, 2020. A total of four individuals called in to the public hearing. The project was presented by a representative from Riverside. No members of the public spoke in support or opposition to the proposed project.

**(ii) the availability of reasonable alternatives to the proposed project that would meet the needs of the people in the area to be served in a less costly, more efficient, or more effective manner;**

The applicant has not identified any reasonable alternatives to the proposed project that would meet the needs of the population in a less costly, more efficient, or more effective manner. As the status quo would not address the extremely high utilization of the existing

CT scanners, DCOPN does not find it to be a reasonable alternative. This high utilization can result in delays in patients receiving CT scans, which can, in some cases, lead to delays in treatment. Additionally, the high utilization of the existing machines would lead to them wearing out at an increased rate.

**(iii) any recommendation or report of the regional health planning agency regarding an application for a certificate that is required to be submitted to the Commissioner pursuant to subsection B of § 32.1-102.6;**

Currently there is no organization in HPR V designated by the Virginia Department of Health to serve as the Health Planning Agency for PD 21. Therefore, this consideration is not applicable to the review of the proposed project.

**(iv) any costs and benefits of the proposed project;**

The total capital and financing costs for the project are \$1,935,750 (Table 2). The project will be paid for by the use of Riverside's accumulated reserves. The costs for the project are reasonable and consistent with previously approved projects to add one CT scanner. For example, COPN VA-04550 issued to University of Virginia Medical Center to add one CT scanner, which cost approximately \$2,015,000; and COPN VA-03941 issued to University of Virginia Imaging, LLC to add one CT scanner, which cost approximately \$2,013,034. The proposed project to add one CT scanner will have several benefits. For example, approval of the project will reduce the burden on Riverside's extremely highly utilized CT scanners. Moreover, the addition of another CT scanner would reduce any delay in patients receiving CT scans that resulted from this extremely high utilization, which could lead to delays in treatment. Finally, Riverside states that 62% of the scans on the existing CT scanners, which accounts for approximately 19,658 scans in 2018, were ordered by physicians in the Emergency Department. As the proposed CT scanner would be placed in the Emergency Department, approval of the project would also streamline and increase the efficiency of the process for patients by eliminating the need to transport them to the central Imaging Center for their CT scan.

**(v) the financial accessibility of the proposed project to the people in the area to be served, including indigent people; and**

According to regional and statewide data regularly collected by VHI, for 2018, the average amount of charity care provided by the facilities in HPR V that reported such charity care for that year was 5.1% of all reported total gross patient revenues (Table 3). In that same year, Riverside reported to have provided 6.81% in charity care for total gross patient revenues. In accordance with section 32.1-102.4.B of the Code of Virginia, should the proposed project to be approved, Riverside is expected to provide a level of charity care for total gross patient revenues that is no less than the equivalent average for charity care contributions in HPR V.

Table 3: HPR V 2018 Charity Care Contributions

Health Planning Region V			
2018 Charity Care Contributions at or below 200% of Federal Poverty Level			
Hospital	Gross Patient Revenues	Adjusted Charity Care Contribution	Percent of Gross Patient Revenue
Bon Secours DePaul Medical Center	\$698,996,618	\$53,230,518	7.62%
Sentara Careplex Hospital	\$889,460,665	\$64,660,889	7.27%
Riverside Tappahannock Hospital	\$162,491,011	\$11,307,825	6.96%
Riverside Regional Medical Center	\$1,861,151,990	\$126,769,911	6.81%
Bon Secours Maryview Medical Center	\$1,273,955,832	\$85,038,667	6.68%
Sentara Obici Hospital	\$825,126,790	\$54,851,619	6.65%
Riverside Walter Reed Hospital	\$252,673,741	\$16,571,599	6.56%
Sentara Virginia Beach General Hospital	\$1,210,282,480	\$67,107,518	5.54%
Riverside Doctors' Hospital Williamsburg	\$124,258,743	\$6,791,596	5.47%
Sentara Norfolk General Hospital	\$3,313,578,465	\$168,093,514	5.07%
Riverside Shore Memorial Hospital	\$235,708,877	\$11,934,270	5.06%
Sentara Leigh Hospital	\$1,182,257,169	\$55,810,160	4.72%
Bon Secours Mary Immaculate Hospital	\$675,071,989	\$29,896,497	4.43%
Sentara Princess Anne Hospital	\$967,617,447	\$38,069,270	3.93%
Sentara Williamsburg Regional Medical Center	\$659,049,590	\$24,789,255	3.76%
Chesapeake Regional Medical Center	\$900,598,911	\$15,330,992	1.70%
Hampton Roads Specialty Hospital	\$25,627,019	\$433,771	1.69%
Southampton Memorial Hospital	\$209,949,572	\$3,282,979	1.56%
Bon Secours Rappahannock General Hospital	\$71,220,177	\$1,107,592	1.56%
Children's Hospital of the King's Daughters	\$1,009,437,096	\$6,094,726	0.60%
Lake Taylor Transitional Care Hospital	\$46,761,019	\$0	0.00%
Hospital For Extended Recovery	\$25,515,975	-\$252,369	-0.99%
<b>Total \$ &amp; Mean %</b>	<b>\$16,620,791,176</b>	<b>\$840,920,799</b>	<b>5.1%</b>

Source: 2018 VHI Data

**(vi) at the discretion of the Commissioner, any other factors as may be relevant to the determination of public need for a proposed project.**

Section 32.1-102.2:1 of the Code of Virginia calls for the State Health Services Plan Task Force to develop, by November 1, 2022, recommendations for a comprehensive State Health Services Plan (SHSP). In the interim, DCOPN will consider the consistency of the proposed project with the predecessor of the SHSP, the State Medical Facilities Plan (SMFP).

DCOPN did not identify any other discretionary factors, not discussed elsewhere in this staff analysis report, to bring to the attention of the Commissioner as may be relevant to determining a public need for the proposed project.

**3. The extent to which the proposed project is consistent with the State Health Services Plan;**

The State Medical Facilities Plan (SMFP) contains the following relevant standards and criteria for the addition of CT services. They are as follows:

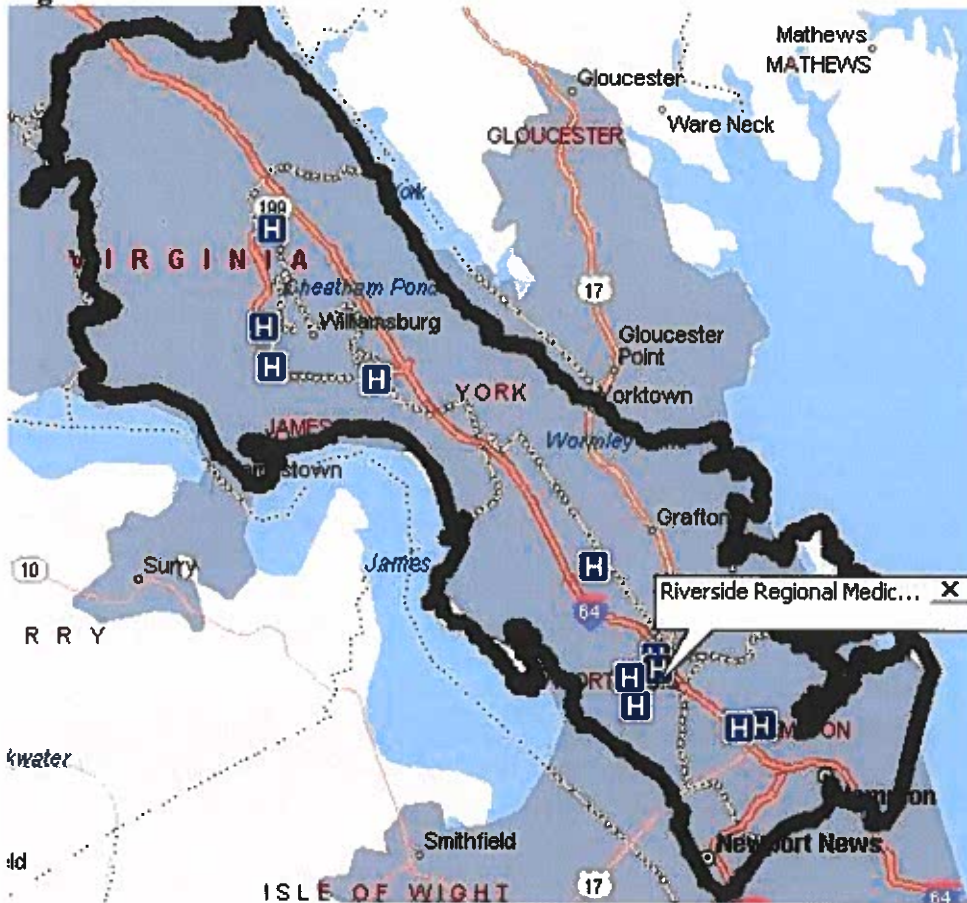
**Part II**  
**Diagnostic Imaging Services**  
**Article 1**  
**Criteria and Standards for Computed Tomography**

**12VAC5-230-90. Travel time.**

**CT services should be available within 30 minutes driving time one way under normal conditions of 95% of the population of the health planning district using mapping software as determined by the commissioner.**

Currently there are 17 COPN authorized CT scanners in PD 21. The heavy black line in Figure 1 is the boundary of PD 21. The grey shaded area includes all locations that are within 30 minutes driving time one way under normal conditions of CT services in PD 21. Figure 1 clearly illustrates that CT services are already well within a 30 minute drive under normal conditions of 95% of the residents of the planning district.

**Figure 1**



**12VAC5-230-100. Need for new fixed site or mobile service.**

**A. No new fixed site or mobile CT service should be approved unless fixed site CT services in the health planning district performed an average of 7,400 procedures per existing and approved CT scanner during the relevant reporting period and the proposed new**



**service would not significantly reduce the utilization of existing providers in the health planning district. The utilization of existing scanners operated by a hospital and serving an area distinct from the proposed new service site may be disregarded in computing the average utilization of CT scanners in such health planning district.**

As noted in Table 4 below, the utilization of existing CT services in the planning district was only 81.5% of the 7,400 procedures per scanner necessary to introduce a new CT scanning service under this section of the SMFP. DCOPN notes that the proposed project does not seek to establish a new CT scanning service where none previously existed, but rather to expand an existing provider’s CT service. As such, the data here is presented merely to provide an overview of the number of CT scanners currently required by the planning district.

COPN authorized scanners = 17

Calculated Needed CT scanners =  $102,551 / 7400 = 13.9$

Calculated Need = 14 CT scanners

Calculated Surplus = 3 CT scanners

**Table 4. PD 21 Fixed CT Units: 2018**

Facility	Number of Scanners	Number of Scans	Utilization Rate
Bon Secours Mary Immaculate Hospital	1	10,633	143.7%
Hampton Roads ENT - Allergy (Hampton Roads Otolaryngology Associates)	1	643	8.7%
Riverside Diagnostic & Breast Imaging Center (Riverside Diagnostic Center - Oyster Point)	1	3,289	44.4%
Riverside Diagnostic Center - Williamsburg	1	2,175	29.4%
Riverside Doctors' Hospital Williamsburg	1	5,504	74.4%
Riverside Regional Medical Center	2	31,706	214.2%
Riverside Regional Medical Center MRI Center - Hampton	1	2,364	31.9%
Sentara Careplex Hospital	3	19,338	87.1%
Sentara Port Warwick II	1	5,793	78.3%
Sentara Williamsburg Regional Medical Center	3	16,782	75.6%
TPMG Imaging Center - Newport News	1	3,042	41.1%
TPMG Imaging Center - Williamsburg	1	1,282	17.3%
<b>2018 Total and Average</b>	<b>17</b>	<b>102,551</b>	<b>81.5%</b>

Source: VHI & DCOPN Records

**B. Existing CT scanners used solely for simulation with radiation therapy treatment shall be exempt from the utilization criteria of this article when applying for a COPN. In addition, existing CT scanners used solely for simulation with radiation therapy treatment may be disregarded in computing the average utilization of CT scanners in such health planning district.**

DCOPN has excluded existing CT scanners used solely for simulation prior to the initiation of radiation therapy from its inventory and average utilization of CT scanners in PD 21 with respect to the proposed project.

**12VAC5-230-110. Expansion of fixed site service.**

**Proposals to expand an existing medical care facility's CT service through the addition of a CT scanner should be approved when the existing services performed an average of 7,400 procedures per scanner for the relevant reporting period. The commissioner may authorize placement of a new unit at the applicant's existing medical care facility or at a separate location within the applicant's primary service area for CT services, provided the proposed expansion is not likely to significantly reduce the utilization of existing providers in the health planning district.**

As detailed in Table 5 below, Riverside's two CT scanners have exceeded the 7,400 procedure utilization threshold for the past five years, and for the past two years have performed more than double the requisite number of procedures per scanner to demonstrate a need for additional capacity.

**Table 5. Riverside Utilization 2014-2018**

Year	Number of Scanners	Number of Procedures	Utilization Rate
2014	2	27,316	184.6%
2015	2	26,564	179.5%
2016	2	29,094	196.6%
2017	2	29,918	202.1%
2018	2	31,706	214.2%

Source: VHI

**12VAC5-230-120. Adding or expanding mobile CT services.**

- A. Proposals for mobile CT scanners shall demonstrate that, for the relevant reporting period, at least 4,800 procedures were performed and that the proposed mobile unit will not significantly reduce the utilization of existing CT providers in the health planning district.**
  
- B. Proposals to convert authorized mobile CT scanners to fixed site scanners shall demonstrate that, for the relevant reporting period, at least 6,000 procedures were performed by the mobile CT scanner and that the proposed conversion will not significantly reduce the utilization of existing CT providers in the health planning district.**

Not applicable. Riverside is not proposing to add or expand mobile CT services or to convert authorized mobile CT scanners to fixed site scanners.

**12VAC5-230-130. Staffing.**

**CT services should be under the direction or supervision of one or more qualified physicians.**

The applicant confirmed that CT services are currently under the direct supervision of board certified radiologists and will remain so should the proposed project be approved.

### Required Considerations Continued

- 4. The extent to which the proposed project fosters institutional competition that benefits the area to be served while improving access to essential health care services for all people in the area to be served;**

As Riverside is an existing provider of CT scanning services with two existing highly utilized machines, approval of the proposed project would not improve institutional competition. As discussed above, while approval would not improve geographic access, approval of the proposed project would improve access to patients of Riverside by reducing any delay in patients receiving scans by Riverside's highly utilized CT scanners.

- 5. The relationship of the proposed project to the existing health care system of the area to be served, including the utilization and efficiency of existing services or facilities;**

Riverside is one of 12 CT service providers in PD 21. As has been discussed, in 2018, Riverside operated two CT scanners with a collective utilization rate of 214.2%. As Riverside's two CT scanners are extremely highly utilized, approval of the project would reduce the heavy burden on Riverside's existing CT scanners. Even with the requested CT scanner accounted for in Riverside's 2018 data, the applicant would still be operating at 143% of the SMFP threshold. Given the extremely high utilization at Riverside, approval of the project is highly unlikely to have a detrimental effect on existing diagnostic CT service providers.

- 6. The feasibility of the proposed project, including the financial benefits of the proposed project to the applicant, the cost of construction, the availability of financial and human resources, and the cost of capital;**

DCOPN concludes that the projected capital costs are reasonable. The total capital and financing costs for the project are \$1,935,750 (Table 2). The project will be paid for by the use of Riverside's accumulated reserves. Consequently, there will be no financing costs associated with the project. The costs for the project are reasonable and consistent with previously approved projects to add one CT scanner. For example, COPN VA-04550 issued to University of Virginia Medical Center to add one CT scanner, which cost approximately \$2,015,000; and COPN VA-03941 issued to University of Virginia Imaging, LLC to add one CT scanner, which cost approximately \$2,013,034.

With regard to human resources, the proposed project will require 4 positions for radiological technologists. The applicant asserts that they receive several applications on a weekly basis from radiological technologists seeking employment at Riverside. Moreover, the applicant states that its accredited Riverside College of Health Careers currently has 43 students enrolled in their radiological technologist program. As such, the applicant asserts, and DCOPN agrees,

that the applicant should be able to staff the proposed project without adversely affecting existing providers.

- 7. The extent to which the proposed project provides improvements or innovations in the financing and delivery of health care services, as demonstrated by; (i) the introduction of new technology that promotes quality, cost effectiveness, or both in the delivery of health care services; (ii) the potential for provision of health care services on an outpatient basis; (iii) any cooperative efforts to meet regional health care needs; and (iv) at the discretion of the Commissioner, any other factors as may be appropriate; and**

As discussed above, 62% of the scans performed on the two existing highly utilized CT scanners at Riverside originate in the Emergency Department, where the proposed CT scanner would be located. As the proposed CT scanner would be used to perform many of these scans for patients in the Emergency Room, approval of the proposed project would provide Riverside more flexibility when scheduling CT scans on an outpatient basis.

- 8. In the case of a project proposed by or affecting a teaching hospital associated with a public institution of higher education or a medical school in the area to be served. (i) The unique research, training, and clinical mission of the teaching hospital or medical school. (ii) Any contribution the teaching hospital or medical school may provide in the delivery, innovation, and improvement of health care for citizens of the Commonwealth, including indigent or underserved populations.**

Although Riverside provides a wide variety of training programs for health professionals through its accredited School of Health and Medical Services, the applicant does not make any assertions about the proposed project affecting a teaching hospital associated with a public institution of higher education or a medical school in the area to be served.

### **DCOPN Findings and Conclusions**

DCOPN finds that the proposed project to expand CT services through the addition of a dedicated intraoperative CT unit Riverside is generally consistent with the applicable criteria and standards of the SMFP and the eight Required Considerations of the Code of Virginia. As previously discussed, in 2018, Riverside operated two CT scanners with a collective utilization rate of 214.2%, which exceeds the SMFP standard for demonstrating a need for additional capacity. Furthermore, given the high utilization of the two existing CT scanners, approval of the proposed project is highly unlikely to have a negative impact on any other existing CT providers.

Moreover, DCOPN finds that the proposed project is more advantageous than the status quo. The status quo would not address the extremely high utilization of the existing CT scanners. This high utilization can result in delays in patients receiving CT scans, which, in some cases, can lead to delays in patients receiving treatment. Additionally, the high utilization of the existing machines would lead to them wearing out at an increased rate. Furthermore, DCPON finds that

the project has no opposition from other providers, health care professionals or community representatives.

Finally, DCOPN finds that the total capital and financing costs for the project are \$1,935,750 (**Table 2**). The project will be paid for by the use of Riverside's accumulated reserves. The costs for the project are reasonable and consistent with previously approved projects to add one CT scanner. For example, COPN VA-04550 issued to University of Virginia Medical Center to add one CT scanner, which cost approximately \$2,015,000; and COPN VA-03941 issued to University of Virginia Imaging, LLC to add one CT scanner, which cost approximately \$2,013,034.

### **DCOPN Staff Recommendation**

The Division of Certificate of Public Need recommends **conditional approval** of the proposed project to expand CT services through the addition of one CT scanner at Riverside Regional Medical Center for the following reasons:

1. The project is generally consistent with the applicable criteria and standards of the State Medical Facilities Plan and the eight Required Considerations of the Code of Virginia.
2. Approval of the project will reduce the burden on Riverside Regional Medical Center's heavily utilized CT scanners,
3. The project is highly unlikely to have an adverse effect on the utilization of existing providers.
4. The project is more favorable than the alternative of the status quo.
5. There is no known opposition to the project.
6. The capital and financing costs are reasonable.

DCOPN's recommendation is contingent upon the applicant's agreement to the following indigent care condition for CT services at Riverside Regional Medical Center:

Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center will provide CT services to all persons in need of this service, regardless of their ability to pay, and will provide as charity care to all indigent persons free services or rate reductions in services and facilitate the development and operation of primary care services to medically underserved persons in an aggregate amount equal to at least 5.1% of Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center's total patient services revenue derived from CT services provided at Riverside Regional Medical Center as valued under the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq. Compliance with this condition will be documented to the Division of Certificate of Public Need annually by providing audited or otherwise appropriately certified

financial statements documenting compliance with the preceding requirement. Riverside Hospital, Inc. d/b/a Riverside Regional Medical Center will accept a revised percentage based on the regional average after such time regional charity care data valued under the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq. is available from Virginia Health Information. The value of charity care provided to individuals pursuant to this condition shall be based on the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq.

Riverside Hospital will provide CT care to individuals who are eligible for benefits under Title XVIII of the Social Security Act (42 U.S.C. § 1395 et seq.), Title XIX of the Social Security Act (42 U.S.C. § 1396 et seq.), and 10 U.S.C. § 1071 et seq. Additionally **Riverside Hospital will** facilitate the development and operation of primary and specialty medical care services in designated medically underserved areas of the applicant's service area.