



COMMONWEALTH of VIRGINIA

Department of Health

PO BOX 2448
RICHMOND, VA 23218

M. Norman Oliver, MD, MA
State Health Commissioner

TTY 7-1-1 OR
1-800-828-1120

February 15, 2021

Ms. Louise B. Edwards
Executive Director, Planning & Development
Bon Secours Mercy Health -- Atlantic Group
110 Kingsley Lane, Suite 511
Norfolk, Virginia 23505

RE: COPN No. VA-04734

**Mary Immaculate Hospital, LLC d/b/a Bon Secours Mary Immaculate Hospital
Newport News, Virginia
Add a second CT scanner at Bon Secours Mary Immaculate Hospital**

Dear Ms. Edwards:

In accordance with Chapter 4, Article 1.1 of Title 32.1 of the Code of Virginia of 1950 (the Code), as amended, I reviewed the application and all supporting documents submitted by Mary Immaculate Hospital, LLC d/b/a Bon Secours Mary Immaculate Hospital to add a second CT scanner at Bon Secours Mary Immaculate Hospital.

As required by Section 32.1-102.3B of the Code, I have considered all factors that must be taken into account in a determination of public need, and I have concluded that **conditional approval** of the request is warranted based on the following findings:

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 Mary Immaculate Hospital's heavily utilized CT scanner.
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.

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This certificate is valid for the period February 15, 2021 through February 14, 2022. The total authorized capital cost of the project is \$547,898.

Please file two copies of the application for a certificate extension with the Department no later than 30 days before the expiration date of the certificate. Part VIII of the Virginia Medical Care Facilities Certificate of Public Need Rules and Regulations identifies the filing requirements and review procedure for certificate extension requests.

Sincerely,

A handwritten signature in blue ink that reads "M. Norman Oliver MD". The signature is fluid and cursive, with the initials "MD" written at the end.

M. Norman Oliver, MD, MA
State Health Commissioner

Enclosures

cc: Allyson Tysinger, Senior Assistant Attorney General, Commonwealth of Virginia
Erik Bodin, Director, Division of Certificate of Public Need
Deborah K. Waite, Operations Manager, Virginia Health Information
Tom Franck, MD, MPH, Acting District Director, Peninsula Health District

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HEALTH
MEDICAL CARE FACILITIES CERTIFICATE OF PUBLIC NEED

THIS CERTIFIES THAT Mary Immaculate Hospital, LLC d/b/a Bon Secours Mary Immaculate Hospital is authorized to initiate the proposal as described below.

NAME OF FACILITY: Bon Secours Mary Immaculate Hospital

LOCATION: 2 Bernardine Drive, Newport News, Virginia 23602

OWNERSHIP AND CONTROL: Mary Immaculate Hospital, LLC d/b/a Bon Secours Mary Immaculate Hospital

SCOPE OF PROJECT: Add a second CT scanner at Bon Secours Mary Immaculate Hospital. Capital costs associated with this project total \$547,898. The project is expected to be completed by September 1, 2021. This certificate is issued with the condition that appears on its reverse.



Pursuant to Chapter 4, Article 1:1 of Title 32.1, Sections 32.1-102.1 through 32.1-102.12 of the Code of Virginia (1950), as amended and the policies and procedures promulgated thereunder, this Medical Care Facilities Certificate of Public Need is issued contingent upon substantial and continuing progress towards implementation of the proposal within twelve (12) months from the date of issuance. A progress report shall be submitted to the State Health Commissioner within twelve (12) months from the date of issuance along with adequate assurance of completion within a reasonable time period. The Commissioner reserves the right not to renew this Certificate in the event the applicant fails to fulfill these conditions. This Certificate is non-transferable and is limited to the location, ownership, control and scope of the project shown herein.

Certificate Number: VA-04734

Date of Issuance: February 15, 2021

Expiration Date: February 14, 2022


M. Norman Oliver, MD, MA, State Health Commissioner

Mary Immaculate Hospital LLC d/b/a Bon Secours Mary Immaculate Hospital (“Mary Immaculate”), will provide charity care consistent with the 4.0% Bon Secours Hampton Roads Health System (“BSHR”) system-wide condition placed on the previously conditioned COPN No. VA-04237 issued on December 30, 2009 (the “BSHR System-Wide Condition”). 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. Mary Immaculate will accept a revised percentage consistent with any modification to the BSHR System-Wide Condition accepted by BSHR and 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 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. Mary Immaculate 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, Mary Immaculate will facilitate the development and operation of primary and specialty medical care services in designated medically underserved areas of the applicant’s service area. To the extent Mary Immaculate Hospital LLC expects its ability to meet this condition 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. or any revised percentage to be impacted in material part by the expansion of Medicaid in the Commonwealth of Virginia or changes in reimbursement stemming from the response to the COVID-19 pandemic, it may petition the Commissioner for a modification to this condition.