

VIRGINIA DEPARTMENT OF HEALTH

Office of Licensure and Certification

Division of Certificate of Public Need

Staff Analysis

January 20, 2026

RE: COPN Request No. VA-8852

Sentra Hospitals d/b/a Sentra Leigh Hospital

Norfolk, Virginia

Addition of a Fixed MRI Scanner by Conversion of Mobile Site

Applicant

Sentara Hospitals d/b/a Sentara Leigh Hospital (Sentara Leigh) is a wholly owned subsidiary of Sentara Healthcare (Sentara). Sentara is a 501(c)(3) not-for-profit, non-stock corporation headquartered in Norfolk, Virginia. The project will be located off the hospital’s main campus, at the Sentara Greenbrier HealthPlex (Greenbrier) at 713 Volvo Parkway, Chesapeake, Virginia, Health Planning Region (HPR) V, Planning District (PD) 20.

Background

PD 20 had a population of about 1.2 million in 2020 and is projected to grow by just over 40,000 people, 3.3%, between 2020 and 2030. This is less than the population growth rate projected for Virginia during this decade, 5.8% (Table 1).

Table 1: PD 20 Estimated Population

Locality	Experienced 2020			Predicted 2030			2020-2030 Change		
	Total	18 Years+	65 Years+	Total	18 Years+	65 Years+	Total	18 Years+	65 Years+
Isle of Wight County	38,606	30,502	7,751	41,341	32,849	10,388	7.1%	7.7%	34.0%
Southampton County	17,996	14,566	3,719	17,172	14,050	4,756	-4.6%	-3.5%	27.9%
City of Chesapeake	249,422	190,129	36,045	272,670	209,554	50,838	9.3%	10.2%	41.0%
City of Franklin	8,180	6,304	1,787	7,667	5,898	1,982	-6.3% ¹	-6.4%	10.9%
City of Norfolk	238,005	189,175	29,215	229,864	184,079	36,636	-3.4%	-2.7%	25.4%
City of Portsmouth	97,915	76,185	15,496	98,857	77,317	19,321	1.0%	1.5%	24.7%
City of Suffolk	94,324	72,341	14,708	102,571	78,958	19,474	8.7%	9.1%	32.4%
City of Virginia Beach	459,470	358,286	69,375	474,052	374,751	94,903	3.2%	4.6%	36.8%
PD 20 Totals	1,203,918	937,488	178,096	1,244,194	977,456	238,297	3.3%	4.3%	33.8%
Virginia	8,631,393	6,729,459	1,395,291	9,129,002	7,173,130	1,762,641	5.8%	6.6%	26.3%

¹ Franklin City’s population is projected to decline from the 2020 population of 8,180 by 6.3%; however, the US Census- Small Area Income and Poverty Estimates (SAIPES) estimates the 2023 population of Franklin City to be 8,215 people. This would indicate that the city has grown 0.4% since 2020 rather than declining.

Source: Weldon-Cooper Data

Greenbrier, the location where the project is located, is in the City of Chesapeake, Virginia, where the total population was 249,422 in 2020 and is projected to grow to 272,670, 9.3%, between 2020 and 2030 (**Table 1**). The growth is almost three times greater than the projected growth rate of the PD and is also greater than the projected growth rate of Virginia's population. The city also has a higher projected population growth rate among adults and individuals over the age of 65.

A Magnetic Resonance Imaging (MRI) scan uses magnetic field and computer-generated radio waves to scan the body to create detailed images of organs, tissues, and skeletal system². An MRI creates a three-dimensional (3D) image of the body and provides details about muscles, ligaments, and organs³. The radio frequency is emitted from the MRI machine and stimulates protons out of equilibrium; once the machine is turned off, the protons return to where they were prior⁴. The scan is noninvasive and distinguishes between types of soft tissues and normal and abnormal soft tissues⁵.

Table 2 documents the 34 MRI scanners in PD 20 currently providing services. Six additional fixed MRI scanners have been approved for PD 20 but are not yet reporting data to VHI.

- COPN No. VA-04735 authorized Lynnhaven Imaging Center to establish imaging services with one MRI scanner; the project filed for indefinite extension citing completion of the project in May 2023, but data was not reported for 2023 or 2024.
- COPN No. VA-04761 authorized Hanbury Imaging Center to establish imaging services with one MRI scanner; the project was completed and began services on December 8, 2025.
- COPN No. VA-04834 authorized West Branch Imaging Center (West Branch) to relocate one MRI scanner from Chesapeake Regional Imaging Center at Kingsborough (Kingsborough) for the establishment of imaging services; the completion date is estimated in February 2027. The project is occurring in tandem with COPN No. VA-04788 which authorized First Meridian Medical, LLC t/a MRI & CT Diagnostics (First Meridian) to relocate one MRI scanner from Kingsborough for the establishment of imaging services. As neither the scanner at the West Branch location nor the First Meridian location is available to provide services, the MRI scanners are still operating at Kingsborough. This would leave Kingsborough without an MRI scanner.
- COPN No. VA-04851 authorized Bon Secours Imaging Town Center to establish imaging services with one MRI scanner and the facility started providing imaging services July 3, 2025.

² Mayo Foundation for Medical Education and Research. (2023, September 9). *MRI*. Mayo Clinic. <https://www.mayoclinic.org/tests-procedures/mri/about/pac-20384768>

³ Memorial Sloan Kettering Cancer Center Department of Radiology. (2025, June 4). *CT scan vs. MRI: What's the difference?* Memorial Sloan Kettering Cancer Center. <https://www.mskcc.org/news/ct-vs-mri-what-s-difference-and-how-do-doctors-choose-which-imaging-method-use>

⁴ <https://www.nibib.nih.gov/science-education/science-topics/magnetic-resonance-imaging-mri>

⁵ Ibid.

Table 2: PD20 MRI Scanners Providing Services (2024)

Facility Name	Stationary Units	Mobile Units
Bon Secours Maryview Medical Center	1	0
Bon Secours Southampton Memorial Hospital	0	1
Chesapeake Regional Imaging - Kingsborough ⁶	2	0
Chesapeake Regional Medical Center	3	0
Children's Hospital of The King's Daughters	2	1
ED - Bon Secours Health Care Center at Harbour View	2	0
ED - Sentara BelleHarbour	1	0
Sentara Advanced Imaging Center - BelleHarbour ⁷		
ED - Sentara Independence	1	0
Sentara Independence ⁸		
MRI & CT Diagnostics - Chesapeake	2	0
MRI & CT Diagnostics - Virginia Beach	2	0
Riverside Diagnostic Center - Smithfield ⁹	0	1
Chesapeake Regional Imaging - Kempsville ¹⁰	1	0
Sentara Advanced Imaging Center - Greenbrier Healthplex	0	1
Sentara Advanced Imaging Center - Princess Anne	1	0
Sentara Advanced Imaging Center - St. Luke's	0	1
Sentara Advanced Imaging Center at First Colonial	1	0
Sentara Advanced Imaging Solutions at North Leigh Campus	1 ¹¹	0
Sentara Leigh Hospital	2 ¹²	0
Sentara Norfolk General Hospital	3 ¹³	0
Sentara Obici Hospital	2	0
Sentara Princess Anne Hospital	1	0
Sentara Virginia Beach General Hospital	1	0
PD 20 Total	29	5
Grand Total	34	

Source: VHI Data, DCOPN Records

⁶ Kingsborough will close the facility once the projects replacing and relocating the MRI scanners are complete.

⁷ The MRI scanner at ED-Sentara BelleHarbour and Sentara Advanced Imaging Center- BelleHarbour is under the same certificate (COPN VA-04133) and is the same machine.

⁸ The MRI scanner at ED-Sentara Independence and Sentara Independence Hospital is under the same certificate (COPN VA-03534) and is the same machine.

⁹ Riverside Diagnostic Center- Smithfield surrendered the certificate COPN VA-04781 which allowed for MRI services to the diagnostic center on January 9, 2023. This was after the authorization of COPN VA-04781 which authorized Riverside Smithfield Hospital to provide mobile MRI services. The hospital is expected to start services in December 2025.

¹⁰ Chesapeake Regional Imaging- Kempsville, also known as MRI & CT- Kempsville, was confirmed closed during a call to the facility on December 3, 2025. The facility was open in 2024, however, so it was included in the inventory.

¹¹ COPN VA-04932 authorized the expansion of services with the existing MRI through the removal of the restriction; this was expected to take effect on July 31, 2025.

¹² One of the scanners authorized to Sentara Leigh Hospital is located at the Brock Cancer Center location.

¹³ Virginia Health Information data for 2024 lists four MRI units at Sentara Norfolk General Hospital. DCOPN records indicate that one of these four MRI units is an intraoperative unit; therefore, DCOPN did not include it in the inventory in **Table 2**.

Table 3 shows the above stated authorized scanners that did not provide services in 2024. With the closure of the Chesapeake Regional Imaging- Kempsville location and scanner, the introduction of as well as the authorization of the relocation of both of Kingsborough’s scanners to West Branch and First Meridian, the total number of fixed MRI scanners is 31.

Table 3: Authorized Fixed MRI Scanners not Providing Services (2024)

Facility	Fixed Scanners	Authorizing Certificate	Start of Services
Lynnhaven Imaging Center	1	VA-04735	May-23
Hanbury Imaging Center	1	VA-04761	Nov-25
West Branch Imaging Center	1	VA-04834	Feb-27
First Meridian Medica, LLC t/a MRI & CT Diagnostics	1	VA-04788	Feb-27
Bon Secours Imaging Town Center	1	VA-04851	Jul-25
Total	5		

Source: DCOPN Inventory

The utilization of scanners in the PD is documented in **Table 4** for the fixed scanners and **Table 5** for the mobile units. In 2024, fixed sites had a utilization of 94.2% and mobile sites had a utilization of 40.7%.

Table 4: Utilization of Fixed MRI Scanners Providing Services, 2024

	Fixed Units	Procedures on Fixed Units	Utilization
Bon Secours Maryview Medical Center	1	4,036	80.7%
Chesapeake Regional Imaging - Kingsborough	2	11,760	117.6%
Chesapeake Regional Medical Center	3	8,482	56.5%
Children's Hospital of The King's Daughters	2	6,152	61.5%
ED - Bon Secours Health Care Center at Harbour View	2	6,620	66.2%
ED - Sentara BelleHarbour	1	145	99.2%
Sentara Advanced Imaging Center - Belleharbour		4,816	
ED - Sentara Independence	1	132	129.5%
Sentara Independence		6,345	
MRI & CT Diagnostics - Chesapeake	2	6,743	67.4%
MRI & CT Diagnostics - Virginia Beach	2	7,507	75.1%
Chesapeake Regional Imaging - Kempsville	1	1,846	36.9%
Sentara Advanced Imaging Center - Princess Anne	1	5,678	113.6%
Sentara Advanced Imaging Center at First Colonial	1	5,193	103.9%
Sentara Advanced Imaging Solutions at North Leigh Campus	1	3,171	63.4%
Sentara Brock Cancer Center	1	5,330	106.6%
Sentara Leigh Hospital	1	8,461	169.2%
Sentara Norfolk General Hospital	3	17,025	113.5%
Sentara Obici Hospital	2	9,734	97.3%
Sentara Princess Anne Hospital	1	8,749	175.0%
Sentara Virginia Beach General Hospital	1	8,735	174.7%
PD 20 Fixed Total	29	136,660	94.2%

Source: VHI Data, DCOPN Records

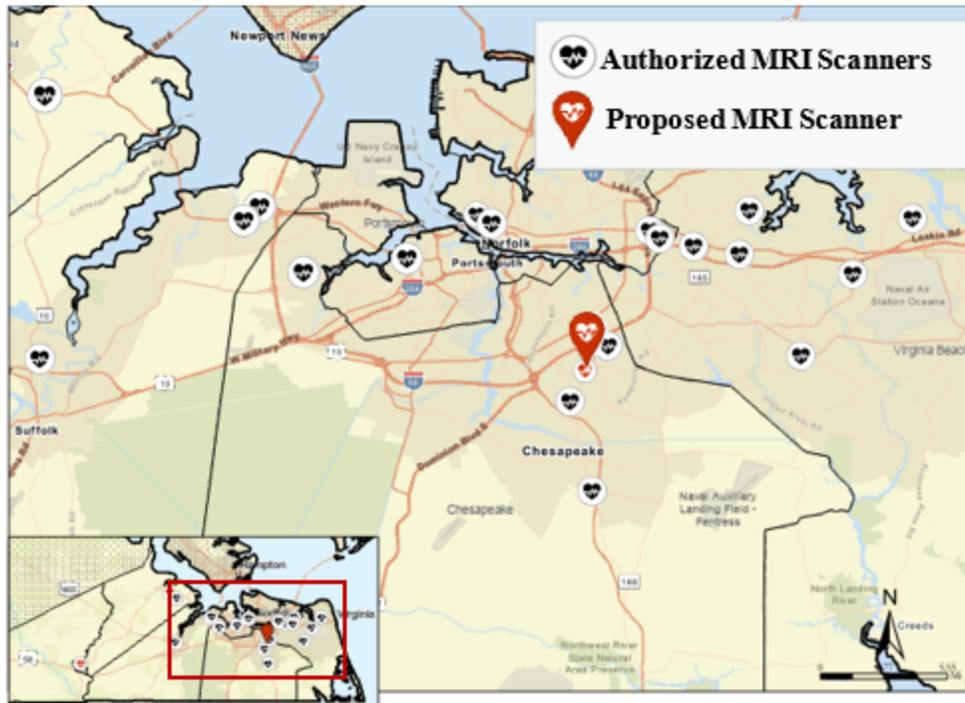
Table 5: Utilization of Mobile MRI Scanners Providing Services, 2024

	Mobile Units	Half days	Procedures on Mobile Units	Utilization	% of Threshold to Convert to Fixed ¹⁴
Bon Secours Southampton Memorial Hospital	1	6	1,204	40.1%	40.1%
Children's Hospital of The King's Daughters	1	4	523	26.2%	17.4%
Riverside Diagnostic Center - Smithfield	1	4	800	40.0%	26.7%
Sentara Advanced Imaging Center - Greenbrier Healthplex	1	9	3,490	77.6%	116.3%
Sentara Advanced Imaging Center - St. Luke's	1	1 ¹⁵	99	19.8%	3.3%
PD 20 Mobile Total	5		6,116	51.0%	40.7%

Source: VHI Data

Map 1 shows the location of the proposed project in relation to the other facilities that have certificates in PD20. Locations with authorized certificates are designated with black icons and the proposed fixed scanner is indicated with the red icon.

Map 1: Authorized MRI Scanners, PD20



Source: ArcGIS, DCOPN Inventory, VHI Records

Greenbrier is located near the north of the City of Chesapeake. There are two fixed MRI scanners currently providing services within a ten-mile radius. Chesapeake Regional Medical Center is

¹⁴ The percentage in **Table 5** is calculated using the same formula for the fixed scanners, but with the 3,000-scan threshold for conversion of mobile MRI scanner to fixed, and not the 5,000-scan threshold used for fixed utilization shown in **Table 4**.

¹⁵ The mobile MRI scanner at the St. Luke's Imaging Center also provides service to Greenbrier currently. The scanner goes to the St. Luke facility one Monday every three weeks. This will continue with the approval of the project.

approximately 1.5 miles southwest and operated at 56.5% utilization in 2024. MRI & CT Diagnostics- Chesapeake is 7.2 miles south and operated at 67.4% utilization in 2024. Hanbury Imaging Center is authorized to provide MRI services in the region as well and began services on December 8, 2025. Hanbury Imaging Center is approximately 2.9 miles northeast of Greenbrier.

Greenbrier is located approximately 9 miles from Sentara Leigh’s main campus and includes several existing medical offices. There are “doctors’ offices, diagnostic services, physical therapy and women’s imaging services” at the facility. There are two COPN certificates authorized to Greenbrier- a certificate for a computed tomographic (CT) scanner¹⁶ was authorized in 2004, and COPN VA-04040 authorized the facility as a location for a mobile MRI scanner in 2006. The mobile scanner reported 9 half-days at Greenbrier each week, equating to four and a half days, and had a utilization of 77.6%¹⁷ in 2024, which was the last year for which data is available. MRI scans provided at Greenbrier are performed and interpreted by physicians associated with Medical Center Radiologists.

Proposed Project

Sentara Leigh is proposing the addition of a fixed MRI scanner to an existing medical facility located at the Greenbrier HealthPlex through the conversion of an existing mobile MRI scanner. The MRI will be located within a space that is currently a conference room, requiring renovations to the interior space as well as the exterior to add an emergency exit. The renovations will cover approximately 1,500 square feet and are included in the \$935,000 direct construction costs (Table 6). The cost per square foot is approximately \$623.33. This is less than similar projects¹⁸. The total capital cost of the project is estimated to be \$2,415,986.

Table 6: Total Cost Summary

Direct Construction Cost	\$ 935,000
Equipment Not Included in Construction	\$ 1,362,646
Architectural and Engineering fees	\$ 118,340
Total Capital Cost	\$ 2,415,986

Source: COPN Request No. VA-8852

Project Definition

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 magnetic resonance imaging (MRI).” A medical care facility is defined, in part, as “[a]ny specialized center or clinic or that portion of a physician's office developed for the provision of... magnetic resonance imaging (MRI)”.

¹⁶ COPN- VA-03790

¹⁷ The calculation was done with the formula for fixed utilization. The 5,000 standard was changed to 4,500 for this calculation alone as the mobile site is open 9 half-days.

¹⁸ COPN Request No. VA-8840 was for the introduction of a fixed MRI scanner with a cost of \$935.09 per square foot. COPN Request No. VA-8808 for the establishment of an imaging center with the introduction of one fixed MRI scanner had a cost of \$1,605.87 per square foot.

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 service or facility will provide or increase access to needed services for residents of the area to be served, and the effects that the proposed service or facility will have on access to needed services in areas having distinct and unique geographic, socioeconomic, cultural, transportation, and other barriers to access to care.**

Greenbrier is located within the City of Chesapeake in PD 20. The population of the City of Chesapeake is expected to grow 9.3% from the 2020 population of 249,422 to the 2030 population of approximately 272,670 (Table 1). In 2023, the last year for which poverty data is available, the city had a poverty rate of 10% (Table 7) which is an increase from the 8.7% estimated in 2022. The rate is slightly lower than the PD average, 11.8%, and close to the poverty rate of Virginia, 10.2%.

Table 7: Poverty Rate of PD20 (2023)

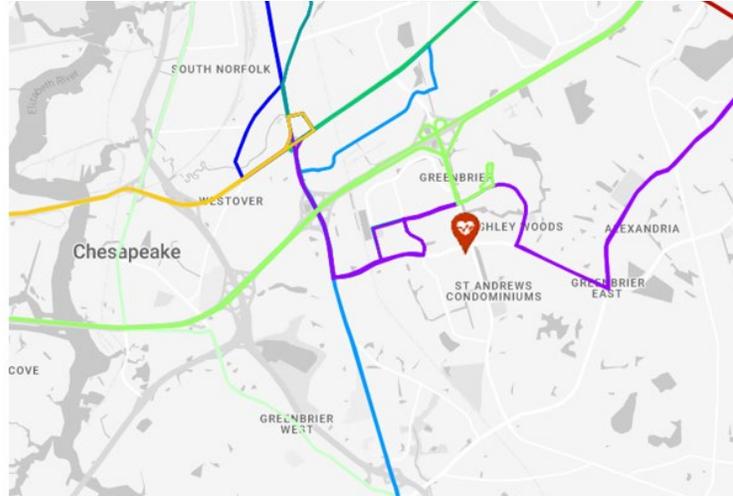
Name	Total Population	Population in Poverty	Percent in Poverty
Isle of Wight County	40,444	2,952	7.3%
Southampton County	16,491	2,195	13.3%
City of Chesapeake	249,384	24,815	10.0%
City of Franklin	8,215	1,628	19.8%
City of Norfolk	209,028	38,185	18.3%
City of Portsmouth	93,871	17,578	18.7%
City of Suffolk	99,119	11,033	11.1%
City of Virginia Beach	446,231	38,630	8.7%
PD20	1,162,783	137,016	11.8%
Virginia	8,472,709	867,052	10.2%

Source: US Census-SAIPE Data

Hampton Roads Transit (HRT) provides public transportation around the Hampton Roads area, which includes the City of Chesapeake. **Map 2** shows the nearby transit lines to Greenbrier, the location highlighted by the red mark. The lines are highlighted with various colors; the colors are to show differentiation per the website but are not specific to this report. Beyond the transit line highlighted blue, which travels south for approximately 5 miles, all existing HRT lines are north of Greenbrier. One-way trip tickets for adults are \$2 at regular price, or \$1 at a discounted fare if the passenger is preapproved. A day pass can be purchased for \$4.50. For individuals with disabilities, paratransit rides can be scheduled between 4am and midnight and cost

approximately \$3.50 per trip¹⁹. The trips must be scheduled at least one day prior to transportation.

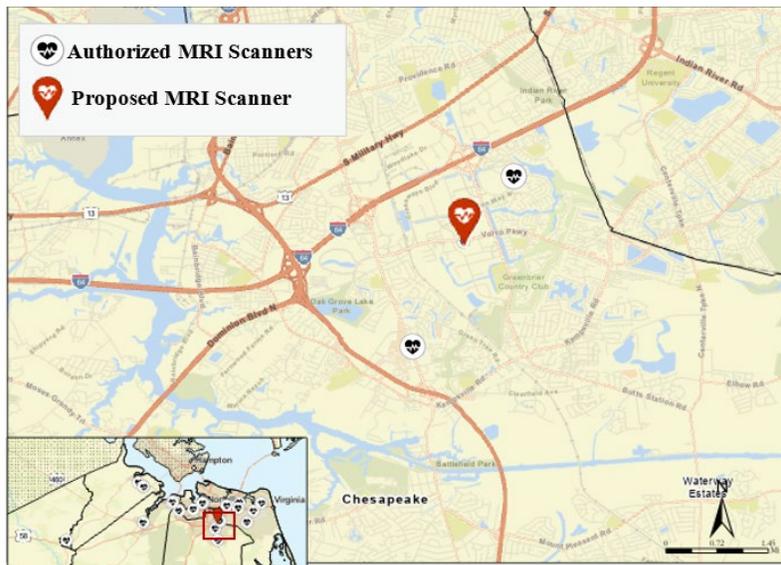
Map 2: Hampton Roads Transit System by Greenbrier



Source: HRT website, COPN Request No. VA-8852

Patients with Virginia Medicaid, including the Sentara Community Plan, are also eligible for Modivcare. Modivcare provides non-emergency medical transportation to qualifying participants for no charge.

Map 3: Nearby Transit to Greenbrier



Source: ArcGIS, DCOPN Inventory, VHI Records

¹⁹ The \$3.50 cost is the standard price. Trips scheduled for the same day are classified as Premium Paratransit and cost \$7. Free standard paratransit transportation is available for some users pending approval by HRT.

Map 3 shows the nearby transit to the Greenbrier location and in relation to two authorized MRI scanners. Entrances to I-64, I-464, Highway 168, and Highway 13 are within a four-mile radius to the location.

2. The extent to which the project will meet the needs of the residents of the area to be served, as demonstrated by each of the following:

(i) The level of community support for the project demonstrated by citizens, businesses, and governmental leaders representing the area to be served.

DCOPN received three letters of support from associates of Medical Center Radiologists. The support was via form letters and stated that the current radiologists are responsible for performing and interpreting scans at the Greenbrier location. As such the doctors noted an increase in utilization of the scanner.

There were also nineteen other letters from Sentara doctors from various specialties, including neurosurgery, primary care, and breast cancer, who wrote in support of the project. The letters, in aggregate, stated that approval of the project would reduce scheduling delays and improve access to patients who may face socioeconomic or transportation barriers.

Public Hearing

§32.1-102.6B of the Code of Virginia directs DCOPN to hold one public hearing on each application in the case of competing applications; or in response to a written request by an elected local government representative, a member of the General Assembly, the Commissioner, the applicant, or a member of the public. COPN Request No. VA-8852 is not competing with another project and DCOPN did not receive a request to conduct a public hearing for the proposed project. Thus, no public hearing was held.

DCOPN provided notice to the public regarding this project inviting public comments on November 25, 2025. The public comment period closed on January 9, 2026. Other than the letters of commitment referenced above, no members of the public commented. There is no known opposition to the project.

(ii) The availability of reasonable alternatives to the proposed service or facility that would meet the needs of the population in a less costly, more efficient, or more effective manner.

One alternative to the project would be the status quo. There are five unrestricted fixed scanners which have been authorized in PD 20 but have not yet started reporting data. Of which, Hanbury Imaging Center is less than three miles away and began providing services in December 2025. An alternative would be to wait to see the utilization of the facilities prior to the approval of additional scanners.

However, Sentara Leigh is currently operating a mobile scanner at Greenbrier. The facility performed a total of 3,490 procedures in 2024, which equates to 116.3% of the SMFP threshold to convert mobile scanner to fixed. The applicant projects an increase in utilization as well.

(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 20. Therefore, this consideration is not applicable to the review of the proposed project.

(iv) Any costs and benefits of the project.

As shown in **Table 6**, the projected capital costs for the project are \$2,415,986, which represents the costs for construction, equipment, and assorted fees. All costs are expected to be paid for through accumulated reserves, so there is no financing cost associated with the proposal, and the applicant states that it does not expect capital costs to have an impact on patient care.

Table 6: Total Cost Summary *(as shown above)*

Direct Construction Cost	\$ 935,000
Equipment Not Included in Construction	\$ 1,362,646
Architectural and Engineering fees	\$ 118,340
Total Capital Cost	\$ 2,415,986

Source: COPN Request No. VA-8852

The applicant states that the conversion of the scanner from mobile to fixed will allow for services to be provided in more “comfortable, patient friendly [settings],” and for the provision of imaging services for a wider percentage of the current patient base. There are physicians providing care at Greenbrier who are partnering with Pulse Radiology and Tidewater Community College providing clinical experiences for students. The applicant also states that the conversion to a fixed lab will allow for more students to observe and participate in the clinical process “without disrupting workflow.”

(v) The financial accessibility of the project to the residents of the area to be served, including indigent residents.

Section 32.1-102.4. B of the Code of Virginia indicates that, should the proposed project receive approval, the project would be conditioned to provide a level of charity care. Pursuant to the Code of Virginia language any COPN issued for this project will also be conditioned on the applicant’s agreement to accept patients who are the recipients of Medicare and Medicaid.

Table 8: 2024 Charity Care Contributions at or below 200% of Federal Poverty Level (HPR V)

Inpatient Hospitals	Gross Patient Revenue	Charity Care	% of Gross Patient Revenue
Riverside Shore Memorial Hospital	\$ 354,364,851	\$ 16,373,174	4.62%
Riverside Doctors' Hospital Williamsburg	\$ 297,237,405	\$ 12,131,900	4.08%
Riverside Walter Reed Hospital	\$ 387,098,512	\$ 11,102,707	2.87%
Sentara Careplex Hospital	\$ 1,313,698,788	\$ 37,496,919	2.85%
Sentara Obici Hospital	\$ 1,352,671,244	\$ 35,372,773	2.62%
Sentara Virginia Beach General Hospital	\$ 1,825,705,099	\$ 47,186,982	2.58%
Sentara Leigh Hospital	\$ 2,192,444,921	\$ 50,952,088	2.32%
Sentara Norfolk General Hospital	\$ 4,894,539,810	\$ 107,248,394	2.19%
Riverside Regional Medical Center	\$ 3,356,990,790	\$ 63,591,379	1.89%
Chesapeake Regional Medical Center	\$ 1,357,755,934	\$ 21,073,675	1.55%
Sentara Williamsburg Regional Medical Center	\$ 873,857,607	\$ 13,241,461	1.52%
Sentara Princess Anne Hospital	\$ 1,544,557,025	\$ 25,184,203	1.63%
Virginia Beach Psychiatric Center	\$ 54,267,999	\$ 582,000	1.07%
VCU Health Tappahannock Hospital	\$ 235,011,627	\$ 1,062,189	0.45%
Bon Secours Southampton Medical Center	\$ 230,185,097	\$ 2,072,911	0.90%
Bon Secours Maryview Medical Center	\$ 1,541,147,853	\$ 10,718,119	0.70%
Bon Secours Mary Immaculate Hospital	\$ 802,263,279	\$ 3,656,976	0.46%
Bon Secours Rappahannock General Hospital	\$ 117,738,136	\$ 595,586	0.51%
The Pavilion at Williamsburg Place	\$ 61,494,600	\$ 227,828	0.37%
Newport News Behavioral Health Center	\$ 35,970,167	\$ 108,740	0.30%
Children's Hospital of the King's Daughters	\$ 1,575,120,453	\$ 3,920,403	0.25%
Hospital For Extended Recovery	\$ 34,590,910	\$ 16,000	0.05%
Riverside Rehabilitation Hospital	\$ 109,190,304	\$ -	0.00%
Select Specialty Hospital-Hampton Roads	\$ 121,007,932	\$ -	0.00%
Kempsville Center for Behavioral Health	\$ 51,735,416	\$ -	0.00%
Lake Taylor Transitional Care Hospital	\$ 46,192,534	\$ -	0.00%
Total Inpatient Facilities:			26
HPR V Inpatient Total \$ & Mean%	\$ 24,766,838,293	\$ 463,916,407	1.9%

Outpatient Hospitals	Gross Patient Revenue	Charity Care	% of Gross Patient Revenue
Riverside Peninsula Surgery Center	\$ 39,509,332	\$ 1,248,200	3.16%
Careplex Orthopedic Ambulatory Surgery Center	\$ 63,138,487	\$ 1,593,954	2.52%
Sentara BelleHarbour Ambulatory Surgery Center	\$ 6,636,653	\$ 138,219	2.08%
Riverside Hampton Surgery Center	\$ 39,901,658	\$ 386,418	0.97%
Riverside Doctors Surgery Center	\$ 48,292,467	\$ 345,699	0.72%
CHKD Health & Surgery Center (Virginia Beach)	\$ 41,975,738	\$ 159,916	0.38%
Sentara Princess Anne Ambulatory Surgery Management, LLC	\$ 49,297,412	\$ 174,534	0.35%
CHKD Health & Surgery Center (Newport News)	\$ 26,304,861	\$ 80,552	0.31%
Bon Secours Mary Immaculate Ambulatory Surgery Center	\$ 26,840,062	\$ 52,417	0.20%
Leigh Orthopedic Surgery Center, LLC	\$ 148,643,492	\$ 4,500	0.00%
Bon Secours Surgery Center at Harbour View, L.L.C.	\$ 103,392,678	\$ 3,358	0.00%
Surgical Suites of Coastal Virginia	\$ 36,498,457	\$ -	0.00%
Sentara Obici Ambulatory Surgery LLC	\$ 60,137,996	\$ -	0.00%
Sentara Virginia Beach Ambulatory Surgery Center	\$ 30,832,912	\$ -	0.00%
Surgery Center of Chesapeake	\$ 28,311,404	\$ -	0.00%
CVP Surgery Center	\$ 59,660,549	\$ -	0.00%
Sentara Port Warwick Surgery Center	\$ 33,026,922	\$ -	0.00%
Bayview Medical Center, Inc	\$ 4,592,699	\$ -	0.00%
Advanced Vision Surgery Center LLC	\$ 1,858,446	\$ -	0.00%
Virginia Beach Health Center	\$ 2,647,444	\$ -	0.00%
Sentara Leigh Orthopedic Surgery Center, LLC	\$ 58,117,293	\$ -	0.00%
Total Outpatient Facilities:			21
HPR V Outpatient Total \$ & Mean%	\$ 909,616,962	\$ 4,187,767	0.5%
Total Facilities:			47
HPR V Total \$ & Mean%	\$ 25,676,455,255	\$ 468,104,174	1.8%

Sentara Leigh reported 2.32% charity care, which is slightly higher than the HPR average of 1.8%. Sentra has a system wide charity care of 1.8% across all facilities and included charity care aligning with this in the Pro Forma of the application. The applicant estimated a charity care amount of \$409,343 (1.8% of the estimated \$22,894,577 total) in 2027, which will be the first full year of providing fixed site MRI services.

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

There are no other factors, not addressed elsewhere in the analysis, relevant to the determination of a public need for either project.

3. The extent to which the application is consistent with the State Medical Facilities Plan.

Section 32.1-102.2:1 of the Code of Virginia calls for the State Health Services Plan Task Force to develop 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).

The SMFP contains the criteria and standards for magnetic resonance imaging (MRI) services. They are as follows:

Part II. Diagnostic Imaging Services

Article 2. Criteria and Standards for Magnetic Resonance Imaging

12VAC5-230-140. Travel time.

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

Map 3 shows the 30-minute drive-time accessibility from each authorized MRI scanner in the PD in green. The blue outline shows how the proposed project will impact the availability of services. The scanners already in place are within 30 minutes driving time to 95% of the population, within normal conditions. The addition of the Sentara Leigh proposal will not add to the accessibility of MRI services via drive-time.

Map 3: Drive Time from Authorized MRI Scanners (PD 20)



Source: ArcGIS, DCOPN Inventory, VHI Records

12VAC5-230-150. Need for new fixed site service.

No new fixed site MRI services should be approved unless fixed site MRI services in the health planning district performed an average of 5,000 procedures per existing and approved fixed site MRI scanner during the relevant reporting period and the proposed new service would not significantly reduce the utilization of existing fixed site MRI

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 MRI scanners in such health planning district.

The fixed sites providing MRI services in 2024 averaged 4,691 scans with a 94.2% utilization, which is less than the 5,000 procedures required for a new fixed service (Table). Sentara BelleHarbour ED and the Imaging Center at BelleHarbour as well as Sentara Obici Hospital were removed from consideration due to being operated by a hospital and serving an area distinct from Greenbrier.

Table 9: Utilization of Fixed MRI Scanners Providing Services, 2024

	Fixed Scanners	Average Procedures per Scanner	Utilization
Bon Secours Maryview Medical Center	1	4,036	80.7%
Chesapeake Regional Imaging - Kingsborough	2	5,880	117.6%
Chesapeake Regional Medical Center	3	2,827	56.5%
Children's Hospital of The King's Daughters	2	3,076	61.5%
ED - Bon Secours Health Care Center at Harbour View	2	3,310	66.2%
ED - Sentara Independence	1	4,961	129.5%
Sentara Independence			
MRI & CT Diagnostics - Chesapeake	2	3,372	67.4%
MRI & CT Diagnostics - Virginia Beach	2	3,754	75.1%
Chesapeake Regional Imaging - Kempsville	1	1,846	36.9%
Sentara Advanced Imaging Center - Princess Anne	1	5,678	113.6%
Sentara Advanced Imaging Center at First Colonial	1	5,193	103.9%
Sentara Advanced Imaging Solutions at North Leigh Campus	1	3,171	63.4%
Sentara Brock Cancer Center	1	5,330	106.6%
Sentara Leigh Hospital	1	8,461	169.2%
Sentara Norfolk General Hospital	3	5,675	113.5%
Sentara Princess Anne Hospital	1	8,749	175.0%
Sentara Virginia Beach General Hospital	1	8,735	174.7%
PD 20 Fixed Total	26	4,691	93.8%

Source: VHI Data, DCOPN Records

12VAC5-230-160. Expansion of fixed site service.

Proposals to expand an existing medical care facility's MRI services through the addition of an MRI scanner may be approved when the existing service performed an average of 5,000 MRI procedures per scanner during the relevant reporting period. The commissioner may authorize placement of the new unit at the applicant's existing medical care facility, or at a separate location within the applicant's primary service area for MRI services, provided the proposed expansion is not likely to significantly reduce the utilization of existing providers in the health planning district.

This criterion does not apply as the applicant is proposing the introduction of MRI services to the site, not expansion.

12VAC5-230-170. Adding or expanding mobile MRI services.

- A. Proposals for mobile MRI scanners shall demonstrate that, for the relevant reporting period, at least 2,400 procedures were performed and that the proposed mobile unit will not significantly reduce the utilization of existing MRI providers in the health planning district.**

This criterion does not apply as Sentara Leigh is not proposing the addition or expansion of mobile MRI services.

- B. Proposals to convert authorized mobile MRI scanners to fixed site scanners shall demonstrate that, for the relevant reporting period, 3,000 procedures were performed by the mobile scanner and that the proposed conversion will not significantly reduce the utilization of existing MRI providers in the health planning district.**

The mobile scanner at Greenbrier performed 3,490 procedures in 2024, equating to approximately 116.3% of the 3,000 procedure threshold.

12VAC5-230-180. Staffing.

MRI services should be under the direct supervision of one or more qualified physicians.

The applicant states that all services will be provided under appropriate direct supervision. Scans are supervised and interrupted by physicians at Medical Center Radiologists and will continue to be done so. The doctors with the radiology group have written letters of endorsement for the project.

12VAC5-230-70. Calculation of utilization of services provided with mobile equipment.

- A. The minimum service volume of a mobile unit shall be prorated on a site-by-site basis reflecting the amount of time that proposed mobile units will be used, and existing mobile units have been used, during the relevant reporting period, at each site using the following formula:**

$$\begin{array}{l} \text{Required} \\ \text{minimum service} \\ \text{volume} \end{array} \quad \times \quad \begin{array}{l} \text{Number of days the} \\ \text{service will be on} \\ \text{site each week} \end{array} \quad \times 0.2 = \quad \begin{array}{l} \text{Prorated minimum services} \\ \text{volume}^{20} \end{array}$$

²⁰ This number is not to exceed the required full-time minimum service volume. For MRI services, the prorate minimum services volume is not to exceed 5,000.

The minimum service volume of the mobile scanner for Greenbrier is 4,500 and the total for the PD is 12,000 (Table 10).

Table 10: Calculation of Mobile Minimum Service Volume

Facility	Total Mobile Units	Fixed Minimum Service Volume	Full Days of Service		Minimum Service Volume
Bon Secours Southampton Memorial Hospital	1	5,000	3.0	0.2	3,000
Children's Hospital of The King's Daughters	1	5,000	2.0	0.2	2,000
Riverside Diagnostic Center - Smithfield	1	5,000	2.0	0.2	2,000
Sentara Advanced Imaging Center - St. Luke's	1	5,000	0.5	0.2	500
<i>Sentara Advanced Imaging Center - Greenbrier Healthplex</i>	<i>1</i>	<i>5,000</i>	<i>4.5</i>	<i>0.2</i>	<i>4,500</i>
PD 20 Mobile Total	4	20,000	12.0	0.2	12,000

Source: VHI Data

B. The average annual utilization of existing and approved CT, MRI, PET, lithotripsy, and catheterization services in a health planning district shall be calculated for such services as follows:

Total volume of all units of the relevant service in the reporting
 period

$$\frac{\left(\begin{array}{l} \text{\# of existing} \\ \text{or approved} \\ \text{fixed units} \end{array} \times \begin{array}{l} \text{Fixed unit} \\ \text{minimum service} \\ \text{volume} \end{array} \right) + \text{Y Utilization}}{\text{Actual Total Volume}} \times 100$$

Y = the sum of the minimum service volume of each mobile site in the health planning district with the minimum services volume for each such site prorated according to subsection A of this section.

The average annual utilization of existing and approved MRI services in the PD was 85.5% for 2024.

$$\frac{\left(\begin{array}{l} \text{Authorized} \\ \text{fixed units} \end{array} \times \begin{array}{l} \text{Fixed Minimum} \\ \text{Service Volume} \end{array} \right) + \text{Total Minimum} \\ \text{Service Volume}}{\text{Actual Total Volume}} \times 100$$

$$\frac{\left(31 \times 5000 \right) + 12,000}{142,776} \times 100$$

$$\frac{142,776}{167,000} \times 100$$

85.5%

- C. This section does not prohibit an applicant from seeking to obtain a COPN for a fixed site service provided capacity for the services has been achieved as described in the applicable service section.**

This criterion has been considered in the overall review of the project. The recommendation was not made based on the calculation of mobile service utilization alone.

Required Considerations Continued

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

As the project is for the conversion of the scanner from mobile to fixed, and not the introduction or expansion of the service, it will likely not significantly impact institutional competition in the area.

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

As stated above, the utilization of fixed MRI scanners in the PD was approximately 94.2% of the SMFP threshold for expansion in 2024 with 29 fixed scanners. There are 31 authorized fixed scanners in the PD currently; this accounts for the relocation of two scanners, introduction of three scanners, and closing of one imaging center. There are also five locations for mobile scanners in the PD providing services at approximately 40.7% of the SMFP threshold for conversion to fixed scanners, and 51% utilization. Of the scanners in the PD, 16 of them are owned by Sentara (**Figure 1**).

Figure 1: Authorized Sentara Scanners (PD 20)

Fixed Facility Name	Fixed Units	Scans	Utilization
ED - Sentara BelleHarbour	1	145	99.2%
Sentara Advanced Imaging Center - Belleharbour		4,816	
ED - Sentara Independence	1	132	129.5%
Sentara Independence		6,345	
Sentara Advanced Imaging Center - Princess Anne	1	5,678	88.1%
Sentara Advanced Imaging Center at First Colonial	1	5,193	96.3%
Sentara Advanced Imaging Solutions at North Leigh Campus	1	3,171	157.7%
Sentara Brock Cancer Center	1	5,330	93.8%
Sentara Leigh Hospital	1	8,461	59.1%
Sentara Norfolk General Hospital	3	17,025	88.1%
Sentara Obici Hospital	2	9,734	102.7%
Sentara Princess Anne Hospital	1	8,749	57.1%
Sentara Virginia Beach General Hospital	1	8,735	57.2%
Total PD 20 Sentara Fixed Scanners	14	83,514	83.8%

Mobile Location Name	Mobile Units	Scans	Threshold Percentage	Utilization ²¹
Sentara Advanced Imaging Center - Greenbrier Healthplex	1	3,490	116.3%	77.6%
Sentara Advanced Imaging Center - St. Luke's	1	99	3.3%	19.8%
Total PD 20 Sentara Mobile Scanners	2	3,589	59.8%	71.8%

Source: DCOPN Inventory, VHI Records

Among Sentara owned scanners, the fixed scanners operate at 83.8% and the mobile scanners operate at 71.8%. The Greenbrier location currently has a mobile scanner for nine half-days a week²². The current utilization of the location is 77.6%, with the percentage to convert mobile to fixed scanners is 116.3% of the SMFP conversion threshold.

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

The estimated cost of the project is \$2,415,986 as shown in **Figure 2**. The project will need renovation to the space that will hold the MRI scanner as it is currently being used as a conference room. There is also the purchasing of the MRI scanner and technology, as well as associated fees.

Figure 2: Financial Costs

Capital Cost Summary	
Direct Construction Cost	\$ 935,000
Equipment Not Included in Construction	\$ 1,362,646
Architectural and Engineering fees	\$ 118,340
Total Capital Cost	\$ 2,415,986

Equipment Not Included in Construction	
IT Infrastructure	\$ 28,500
MRI and Medical Equipment	\$ 1,334,146
Subtotal	\$ 1,362,646

Architectural and Engineering fees	
Architect's Design Fee	\$ 56,474
Architect's Supervision Fee	\$ 20,500
Engineering Fees	\$ 40,000
Consultant Fee	\$ 1,366
Subtotal	\$ 118,340

Direct Construction Cost	
Cost of Materials	\$ 300,000
Cost of Labor	\$ 335,000
Included Equipment	\$ 65,000
Builder Overhead and Profit	\$ 150,000
Contingencies Allocation	\$ 85,000
Subtotal	\$ 935,000

Source: COPN Request No. VA-8852

²¹ The utilization in the second table **Figure 1** is calculated using the same formula for the fixed scanners, but with the 3,000scan threshold for conversion of mobile MRI scanner to fixed. The first table is calculated with the 5,000-scan threshold used for fixed utilization.

²² The scanner is moved to Sentara Advanced Imaging Center at St. Luke's one Monday every three weeks.

Among equipment not included in construction costs is the MRI scanner and other medical equipment. Sentara Leigh is proposing the use of Deep Resolve AI technology with the MRI scanner, which is estimated to “reduce scan times by an average of 50%,” which would allow for increased utilization. The mobile scanner at Greenbrier is currently operating at 116.3% of the volume threshold to convert to a fixed MRI.

Sentara Leigh states that the approval of the project will not require the hiring of additional full-time staff. Instead, the project will be staffed by personnel redirected from the mobile scanner; this would leave the scanner with decreased staff at the Advanced Imaging Center- St Luke’s location. While this is important to note, the mobile location is currently reporting operations one half-day a week at this location and has a utilization of 19.8%, and the applicant states that there would need to be at most the addition of one full-time employee to support the location. As such, the changing of staff is not likely to impact imaging services in the PD.

7. The extent to which the project provides improvements or innovations in the financing and delivery of health 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 services on an outpatient basis. (iii) Any cooperative efforts to meet regional health care needs. (iv) At the discretion of the Commissioner, any other factors as may be appropriate.

(i) The project does not introduce new technology. (ii) The project does support Sentara Leigh’s outpatient services. (iii) When appropriate, patients receiving imaging services at Greenbrier will be transferred to Sentara Leigh Hospital. As Sentara Leigh also is the applicant for the proposed MRI, there is not a separate transfer agreement in place. Sentara Leigh has a partnership agreement with two training programs for radiologists providing clinical training for students. (iv) There are no additional factors to be considered.

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.

Sentara Leigh Hospital is not a teaching hospital²³. The hospital has previously been registered as a teaching hospital and still has partnerships with local education programs. The applicant stated that there is a clinical program for radiology residents that is overseen by Medical Center Radiologists who supervise the provision and interpretation of MRI scans at Greenbrier. There are physicians who supervise students at the Greenbrier campus. The conversion of the mobile

²³ The teaching status for Sentara Leigh Hospital as reported by the hospital to VHI was classified as “none” in December of 2025.

MRI to a fixed MRI will allow students to observe and participate in the scanning and interpretation of imaging services performed.

DCOPN Staff Findings and Conclusions

Sentara Hospitals d/b/a Sentara Leigh Hospital (Sentara Leigh) is applying for the addition of one fixed MRI scanner through the conversion of a mobile site at the Sentara Greenbrier HealthPlex (Greenbrier). The scanner will be located at 713 Volvo Parkway, Chesapeake, Virginia. There are 34 MRI scanners providing imaging services in PD20 as of 2024, with 29 said scanners fixed. Five fixed scanner projects have been authorized for the PD, which would bring the total number to 31 once all projects are completed. No additional mobile scanners have been authorized.

There is no known opposition to the project and 22 letters of support. The capital cost of the project is estimated to cost \$2,415,986 and will be paid through accumulated resources. Sentara Healthcare has a system-wide charity care condition of 1.8%. The approval of the Sentara Leigh proposal will not add to the accessibility of MRI services via drive-time as the location is currently operating a mobile MRI scanner, and there are three other authorized facilities in a 10-mile radius. The mobile scanner is currently at 116.3% of the SMFP threshold for conversion of mobile to fixed sites.

DCOPN Staff Recommendations

The Division of Certificate of Public Need recommends **conditional approval** of Sentara Hospitals d/b/a Sentara Leigh Hospital's Certificate of Public Need Request number VA-8852 to add one fixed MRI scanner by the conversion of a mobile site MRI scanner for the following reasons:

1. The proposal to add a fixed MRI scanner by conversion from a mobile site MRI in an existing medical facility is consistent with the standards and criteria of the State Medical Facilities Plan and the 8 Required Considerations of the Code of Virginia.
2. Capital costs for the proposed project are reasonable.
3. The proposed project is unlikely to have a significant negative impact upon the utilization, costs, or charges of other providers of imaging services in PD20.
4. There is no known opposition to the project.

DCOPN's recommendation is contingent upon Sentara Hospitals' agreement to the following charity conditions:

This project shall be subject to the 1.8% system-wide charity care condition applicable to Sentara Health Hampton Roads, as reflected in COPN No. VA-04534 as amended by the State

Health Commissioner by letter dated January 14, 2025 (Sentara Hospitals Hampton Roads system-wide condition). Sentara Health (“Sentara”) will provide healthcare services in Hampton Roads (Health Planning Region (“HPR”) V) to all persons in need of these services, regardless of their ability to pay for those services. Further, Sentara will provide as charity care to all indigent persons whose family income is at or below 200 percent of the federal non-farm poverty level (hereinafter “Qualifying Recipients”) free services or rate reductions in services and facilitate the development and operation of primary and specialty care services to medically underserved persons in HPR V in an aggregate amount equal to at least 1.8% of Sentara’s revenues derived from patient services in HPR V. The valuation of charity care provided pursuant to this condition shall be consistent with the methodology for such valuation as then applied by the Virginia Department of Health.

Starting January 1, 2028, and every third calendar year thereafter, the level of charity care required to be provided by Sentara under this system-wide condition shall be adjusted, up or down, to equal the average charity care level provided in HPR V over the previous three (3) years for which such data has been publicly reported by the end of the prior calendar year.

In calculating the combined value of charity care provided by Sentara Health Hampton Roads facilities pursuant to this condition, Sentara may include the revenues and value of charity care, measured as set forth above, attributable to (i) patient care services provided by Sentara’s facilities in HPR V without charge to Qualifying Recipients, (ii) medical or other outpatient services provided through Sentara-affiliated outreach services in HPR V without charge to Qualifying Recipients, and (iii) physician and ancillary services provided by Sentara-affiliated physician medical practices in HPR V without charge to Qualifying Recipients. Sentara may also include, for purposes of calculating the value of charity care, amounts donated by Sentara to community health centers, free clinics, and similar organizations in HPR V and amounts paid to non-affiliated physicians, medical practices, or other healthcare providers for the provision of medical care in HPR V to Qualifying Recipients, including amounts appropriated to Sentara and retained by organizations to further Sentara’s initiatives to provide care to Qualifying Recipients in HPR V. Sentara also may include, for purposes of calculating the value of charity care, costs associated with providing (a) eligibility services to facilitate receipt of charity care by Qualifying Recipients and (b) items and services provided in connection with indigent care, including, but not limited to, transportation costs, guardian expenses, and durable medical equipment costs (provided, however, that any revenues received by Sentara in connection with the provision of such items and services set forth in this subsection (b) shall be included in Sentara’s revenues subject to this condition).

This condition will apply to all COPNs issued to all Sentara-owned hospitals and other facilities in HPR V prior to and after the effective date hereof, until this condition is amended or upon agreement between the Commissioner and Sentara regarding any exceptions. Each year, Sentara shall provide documentation to the Division of Certificate of Public Need regarding its calculation of the HPR V average applicable in such calendar year, and agrees that such amount shall be applicable to all services then covered by this condition and to any services approved pursuant to new COPNs issued in such calendar year, until such average is adjusted per the methodology set forth herein. Sentara will document compliance with this condition as required by the Virginia Department of Health.