VIRGINIA DEPARTMENT OF HEALTH

Office of Licensure and Certification

Division of Certificate of Public Need

Staff Analysis

September 18, 2026

Re: COPN Request No. VA-8896
Chippenham & Johnston-Willis Hospitals, Inc.
Richmond, Virginia
Add One (1) CT Scanner at Chippenham Hospital

Applicant

Chippenham & Johnston-Willis Hospitals, Inc. (Chippenham & Johnston-Willis) is a proprietary stock corporation owned by HCA, Inc. Chippenham & Johnston-Willis was formed in 1995 from the partnership of Johnston Willis and Chippenham Hospitals. These two hospitals, although separately licensed, are considered one medical center with two campuses. The hospitals have an ultimate parent company of HCA Healthcare, Inc. The site of the proposed project is located at Chippenham Hospital at 7101 Janke Road, in the City of Richmond, Virginia, HPR IV, PD 15.

Background

The City of Richmond is in PD 15 along with Henrico County, Charles City County, Chesterfield County, Goochland County, Hanover County, New Kent County and Powhatan County. The total population of the PD is predicted to grow by 11.1% between 2020 and 2030 with the adult population growing approximately 14.1% and the population of people over the age of 65 growing 36.8% (**Table 1).** The total population growth of the PD is an increase from previous projections that estimated a growth of approximately 8.9%.

Table 1: Predicted Population Change of PD 15 (2025)

	Experienced 2020			Predicted 2030			2020-2030 Change		
	Total	**18+**	**65+**	**Total**	**18+**	**65+**	**Total**	**18+**	**65+**
Charles City County	6,773	5,785	1,776	6,113	5,169	2,177	-9.7%	-10.6%	22.6%
Chesterfield County	364,548	277,149	58,200	425,661	338,854	82,524	16.8%	22.3%	41.8%
Goochland County	24,727	20,484	5,721	29,796	25,695	8,308	20.5%	25.4%	45.2%
Hanover County	109,979	85,947	20,688	119,155	97,634	29,375	8.3%	13.6%	42.0%
Henrico County	334,389	259,925	55,596	357,921	285,204	75,195	7.0%	9.7%	35.3%
New Kent County	22,945	18,235	4,405	30,740	25,410	6,618	34.0%	39.3%	50.2%
Powhatan County	30,333	24,045	5,848	33,083	27,233	8,163	9.1%	13.3%	39.6%
Richmond City	226,610	184,420	29,874	242,288	194,635	36,814	6.9%	5.5%	23.2%
PD 15	**1,120,304**	**875,990**	**182,108**	**1,244,757**	**999,832**	**249,173**	**11.1%**	**14.1%**	**36.8%**
Virginia	**8,631,393**	**6,729,459**	**1,395,291**	**9,060,433**	**7,217,241**	**1,826,064**	**5.0%**	**7.2%**	**30.9%**

Source: Weldon-Cooper Center for Public Service (2025)

The City of Richmond reported a population of 226,610 in the 2020 census, and the population is expected to be approximately 242,288 people in 2030, a 6.9% increase (**Table 1**). This growth will keep the City as the third most populous locality in the PD. The City's projected growth rate of the total population, adults, and individuals over 65 are less than that of the PD and state. The population over the age of 65 shows the most growth (23.2%) of any of the categories for the City.

A computed tomography (CT) scan is a computerized X-ray imaging tool that produces images of the body to diagnose diseases or lesions. The patient lies in a CT machine, and the X-ray source completes a rotation around the body, documenting the skeleton, organs, and tissues[1]. Whereas other X-rays provide two-dimensional (2D) images, a CT scan will produce a three-dimensional (3D) image of the body and can provide a multiple-angle perspective for a scanned area[2]. There were 49 CT scanners in PD 15 that reported to Virginia Health Information (VHI) in 2025, the last year for which data was available. Overall, in the PD, the CT scanners reported usage of 136.8% of the State Medical Facilities Plan (SMFP) threshold (**Table 2**).

[1] "Computed Tomography (CT)." *National Institute of Health*, National Institute of Biomedical Imaging and Bioengineering, July 2025, www.nibib.nih.gov/science-education/science-topics/computed-tomography-ct.
[2] Fayad, Laura M. "CT Scan versus MRI versus X-ray: What Type of Imaging Do I Need?" *Johns Hopkins Medicine*, Johns Hopkins Medicine, 29 Aug. 2025, www.hopkinsmedicine.org/health/treatment-tests-and-therapies/ct-vs-mri-vs-xray.

Table 2: Fixed PD 15 Scanners Reporting to VHI (2025)

Facility Name	Facility Type	Total Units	CT Procedures	Utilization
Bon Secours Memorial Regional Medical Center	Acute Hospital	3	48,211	217.2%
Bon Secours Richmond Community Hospital	Acute Hospital	1	7,562	102.2%
Bon Secours St. Francis Medical Center	Acute Hospital	2	36,360	245.7%
Bon Secours St. Mary's Hospital	Acute Hospital	3	44,921	202.3%
Bon Secours Imaging Center at Reynolds Crossing	Freestanding	1	4,054	54.8%
Bon Secours Westchester Imaging Center	Freestanding	1	9,832	132.9%
ED - Bon Secours Chester Emergency Center	Freestanding ED	1	11,597	156.7%
ED - Bon Secours Short Pump	Freestanding ED	1	13,043	176.3%
Chippenham Hospital	Acute Hospital	3	60,531	272.7%
Henrico Doctors' Hospital - Forest	Acute Hospital	2	42,581	287.7%
Henrico Doctors' Hospital - Parham	Acute Hospital	1	16,754	226.4%
Henrico Doctors' Hospital - Retreat	Acute Hospital	1	3,945	53.3%
Johnston-Willis Hospital	Acute Hospital	3	39,904	179.7%
Independence Park Imaging[3]	Freestanding	1	4,956	67.0%
Chesterfield Imaging	Freestanding	1	6,270	84.7%
ED - Hanover Emergency Center	Freestanding ED	1	4,830	65.3%
ED - Swift Creek ER[4]	Freestanding ED	1	7,938	107.3%
MedRVA Imaging Center	Freestanding	1	767	10.4%
OrthoVirginia[5]	Freestanding	1	723	9.8%
Richmond Ear Nose and Throat	Freestanding	1	266	3.6%
Urosurgical Center of Richmond	OSH [6]	2	8,418	56.9%
VCU Medical Center[7]	Acute Hospital	9	84,660	127.1%
VCU Medical Center at Stony Point Radiology	Freestanding	1	7,088	95.8%
NOW Neuroscience, Orthopedic and Wellness Center[8]	Freestanding	1	6,875	92.9%
ED - MCV/VCU	Freestanding ED	1	7,482	101.1%
Virginia Cancer Institute - Discovery Drive	Freestanding	1	5,407	73.1%
Virginia Cancer Institute - Harbourside	Freestanding	1	5,046	68.2%
Virginia Cardiovascular Specialists, PC	Freestanding	1	4,806	64.9%
Virginia Ear Nose & Throat- Henrico	Freestanding	1	734	9.9%
Virginia Ear Nose & Throat - Chesterfield	Freestanding	1	499	6.7%
PD 15 Total		**49**	**496,060**	**136.8%**

Source: VHI Data

[3] The CT scanner at Independence Park Imaging was replaced and relocated to Short Pump Imaging, LLC, via COPN NO. VA- 04823. Independence Park Imaging is not authorized for the provision of CT scans as of Nov. 15, 2024.
[4] The Swift Creek ER CT scanner is relocating to the Magnolia Hospital (authorized by COPN NO. VA-04981).
[5] Utilization is reported starting October 6, 2025.
[6] Outpatient Surgical Hospital
[7] VCU Medical Campus' reporting CT volume includes: 1 at the Adult Outpatient Pavilion, 1 in the Gateway Building, 2 at the Children's Pavilion, 1 at the at the Critical Care Hospital Neurosciences ICU, 2 at the Main Hospital's Emergency Department, 2 at the Main Hospital' Radiology Department. One of the scanners in the radiology department (COPN No. VA-04464) is an intraoperative scanner and does not count in the overall inventory of diagnostic scanners.
[8] Also called the VCU Short Pump Pavilion.

Chippenham and Johnston-Willis is authorized to establish a specialty imaging center with one CT scanner to be located at the freestanding South Richmond ER[9]. The project was authorized in April 2026 and is expected to begin services around December 27, 2028. A competing application was filed by HCA Health Services of Virginia for the establishment of a specialty imaging center with one CT scanner, to be located at a freestanding ER, the White Oak ER, which was proposed in the same batch cycle. The project was authorized June 2026 and is expected to begin services September 24, 2028 (**Table 3)**.

VCU is authorized to establish a specialty imaging center with one CT scanner to be located at the freestanding VCU Carytown ER[10]. The project was authorized in August 2026 and is expected to begin services around July 27, 2028.

Table 3: CT Scanners at Facilities Authorized but Not Reporting to VHI in 2025

Facility	Fixed Scanners	Certificate	Service Start Estimate	Street Address	County
Ironbridge ER	1	VA-04840	06/01/26	9630 and 9640 Iron Bridge Road	Chesterfield
Scott's Addition ER	1	VA-04811	01/01/27	3054 North Arthur Ashe Blvd	Richmond City
Bon Secours Iron Bridge ER	1	VA-04977	12/31/27	5201 Chippenham Crossing Center	Richmond City
Pauley Heart Center Pavilion at VCU Health	1	VA-04953	04/30/28	1505 Robin Hood Road	Richmond City
VCU Carytown ER	1	VA-05003	8/21/2028	12 North Thompson Steet	Richmond City
White Oak ER	1	VA-04994	09/24/28	4415 S. Laburnum Ave	Henrico
South Richmond ER	1	VA-04989	12/27/28	3830 Hull Street Rd	Richmond City
Magnolia Hospital	1	VA-04982	10/13/29	16100, 16300 & 16500 Hull Street Rd	Chesterfield
VCU Chesterfield Hospital	1	VA-04981	05/30/30	7220 Beach Road	Chesterfield
Scanners Expected	**8**[11]				

Facility	Fixed Scanners	Certificate	Service Start Date	Street Address	City/County
Short Pump Imaging, LLC[12]	1	VA-04823	11/15/24	12402 West Broad Street	Richmond City
Bon Secours Ashland Emergency and Imaging Center	1	VA-04864	11/18/25	1140 North Lakeridge Pkwy	Hanover
Scanners Providing Services not Reporting	**2**[13]				
Total Additional Scanners	**10**				

Source: DCOPN Inventory

[9] COPN No. VA-04989
[10] COPN No. VA-05003
[11] Due to the CT scanner at Magnolia Hospital being relocated from Swift Creek ER, there are eight scanners being added to the PD's inventory, despite the authorization of the nine projects listed in this section.
[12] An Indefinite Extension was filed stating services began in 2024, but, as of the 2025 VHI data, utilization has not been reported.
[13] Due to the CT scanner at Short Pump Imaging, LLC, being relocated from Independence Park Imaging, there are three scanners being added, despite the authorization of the four projects listed in this section.

There are an additional two CT scanners at existing facilities which are authorized but have not yet started services. Henrico Doctors' Hospital- Forest (HDH Forest) is authorized for an additional CT scanner, for a total of 3[14]. The proposed project is expected to be completed in June 2026.

VCU Medical Center is authorized one additional CT scanner, for a total of 10 on its downtown campus. The scanner is authorized via COPN No. VA-04935 at the VCU Medical Center Adult Outpatient Pavilion and is expected to be completed on late 2026 per the 2026 annual extension of the certificate. It will be the second scanner at this location.

Table 4: CT Scanners in PD 15 After Completion of All Authorized Projects

Facilities	Fixed Units	Facilities	Fixed Units
Bon Secours Imaging Center at Reynolds Crossing	1	Bon Secours Ashland Emergency and Imaging Center	1
Bon Secours Memorial Regional Medical Center	3	Bon Secours Iron Bridge ER	1
Bon Secours Richmond Community Hospital	1	VCU Chesterfield Hospital	1
Bon Secours St. Francis Medical Center	2	Iron Bridge ER	1
Bon Secours St. Mary's Hospital	3	Magnolia Hospital[15]	1
Bon Secours Westchester Imaging Center	1	OrthoVirginia	1
ED - Bon Secours Westchester		Pauley Heart Center Pavilion at VCU Health	1
Chesterfield Imaging	1	Scott's Addition ER	1
Chippenham Hospital	3	Short Pump Imaging, LLC	1
ED - Bon Secours Chester Emergency Center	1	Virginia Ear Nose & Throat - Midlothian	1
ED - Bon Secours Short Pump	1	Virginia Ear Nose & Throat - West End	1
ED - Hanover Emergency Center	1	South Richmond ER	1
ED- VCU at Pocahontas Trail	1	White Oak ER	1
Henrico Doctors' Hospital - Forest	3	VCU Carytown ER	1
Henrico Doctors' Hospital - Parham	1		
Henrico Doctors' Hospital - Retreat	1		
Johnston-Willis Hospital	3		
MedRVA Imaging Center	1		
NOW Neuroscience, Orthopedic and Wellness Center	1		
Richmond Ear Nose and Throat	1		
Urosurgical Center of Richmond	2		
VCU Medical Center	10		
VCU Medical Center at Stony Point Radiology	1		
Virginia Cancer Institute - Discovery Drive	1		
Virginia Cancer Institute - Harbourside	1		
Virginia Cardiovascular Specialists, PC	1		
PD 15 CT Scanners	**60**		

Source: DCOPN Inventory

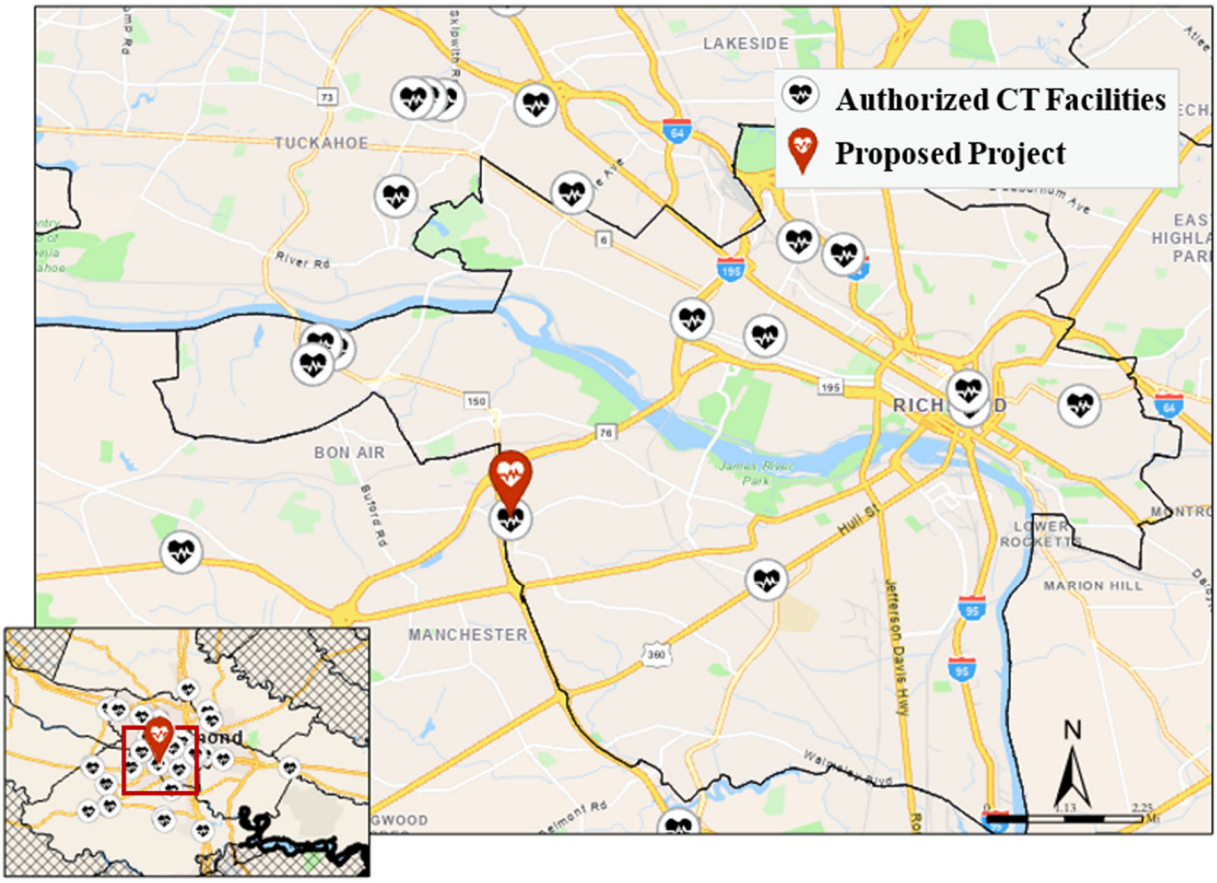
[14] COPN No. VA-04925

[15] The CT scanner at Swift Creek ER will be directly relocated to Magnolia Hospital. The Magnolia ER project that was originally authorized for the scanner is no longer occurring.

VCU Massey Cancer Center at Hanover Medical Park is authorized for one fixed CT simulator[16] and Bon Secours St. Mary's Hospital is also authorized a CT simulator[17]. The Bon Secours proposed project is expected to be completed on July 31, 2026. Neither the VCU Massey Cancer Center's nor Bon Secours St. Mary's Hospital's CT simulators are used in diagnosis or treatment. As such they are not included in the inventory for this report.

Map 1 shows the location of all authorized CT scanners in the PD, with the total scanners shown in a smaller map in the lower left portion of the map. The larger map notes all authorized locations closer to the proposed project. Symbols with red hearts represent locations where scanners are authorized, but either the proposed projects are not yet complete, or the proposed projects are complete, but data has not yet been reported to VHI. Symbols with the black hearts represent locations where authorized scanners are reporting data to VHI A red square on the zoomed-out map highlights the area zoomed-in.

Map 1: Authorized CT Scanners in PD 15



Source: ArcGIS, DCOPN Inventory

Chippenham & Johnston-Willis is a subsidiary of HCA Virginia. Chippenham & Johnston-Willis is currently authorized for six CT scanners, with three located at the Chippenham campus and

[16] COPN No. VA-04546
[17] COPN No. VA-04899.

three located at the Johnston-Willis campus. Chippenham & Johnston-Willis was recently authorized[18] for the establishment of a specialized imaging center at Iron Bridge ER. The ER is expected to start services in June 2026[19] (**Table 3**). The hospital system was also authorized for the establishment of a specialized imaging center at South Richmond ER, which is expected to begin services in December 2028[20].

The CT scanner currently located at the Swift Creek ER will be relocated to Magnolia Hospital,[21] which is projected to be completed in October 2029. The scanner was originally planned to move to the Magnolia ER, but with the authorization of the hospital, the Magnolia ER project will not be continued. The scanner will move directly from Swift Creek ER to Magnolia Hospital. Of the seven Chippenham & Johnston-Willis scanners reporting volumes, there is an average utilization of 209.2% of the SMFP threshold for CT expansion in 2025. If the total scan volume was the same with all scanners in operation, the utilization would be 162.7% (**Figure 1**).

Figure 1: Chippenham & Johnston-Willis Health System Fixed CT Scanners

Scanners Reporting Volumes to VHI (2025)

Facility Name	Total Units	Total Procedures	Utilization
Chippenham Hospital	3	60,531	272.7%
ED - Swift Creek ER	1	39,904	179.7%
Johnston-Willis Hospital	3	7,938	107.3%
Scanners Reporting	**7**	**108,373**	**209.2%**

Scanners Authorized and not Reporting

Facility Name	Additional Scanners	Authorizing Certificate	Expected Start
ED- Iron Bridge	1	VA-04840	June 2026
ED- South Richmond	1	VA-04989	December 2028
Scanners Not Reporting	**2**		
Total VCU Authorized Scanners	**9**		

Utilization with All Chippenham & Johnston- Willis Authorized Projects and 2025 Volume

Facility Name	Total Units	Total Procedures	Utilization
Authorized Projects and 2025 Volume	9	108,373	162.7%

Source: VHI Data**,** DCOPN Records

Proposed Project

Chippenham & Johnston-Willis is applying for the addition of one CT scanner to Chippenham, for a total of four CT scanners at the hospital. Capital costs for the project are estimated at $5,003,461. The proposed project would repurpose existing space, with the proposed CT's control room with the existing scanners.

Table 5: Capital Cost

[18] COPN NO. VA-04840
[19] The applicant submitted a significant change request on March 11, 2026, with an extended date from the original March 1, 2026, deadline.
[20] COPN No. VA-04989
[21] COPN No. VA-04982

Direct Construction	$	2,003,145
Equipment not in Construction	$	2,890,259
Site Acquisition and Preparation	$	7,957
Architectural Fees	$	102,100
Engineering and Consultant Fees	$	-
Total Cost	**$**	**5,003,461**

Source: COPN Request No. VA-8896

Should the proposed project be completed, the expanded CT services will be able to begin 14 months after receiving the certificate. If the certificate is awarded on the projected September 8th deadline outlined in the batch cycle, the additional CT scanner will start services November 8, 2027.

Project Definition

Section 32.1-102.1:3 of the Code of Virginia defines a project 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" with medical care facilities defined, in part, as "[a]ny facility licensed as a hospital".

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.**

Table 6: PD 15 Estimated Population in Poverty (2024)

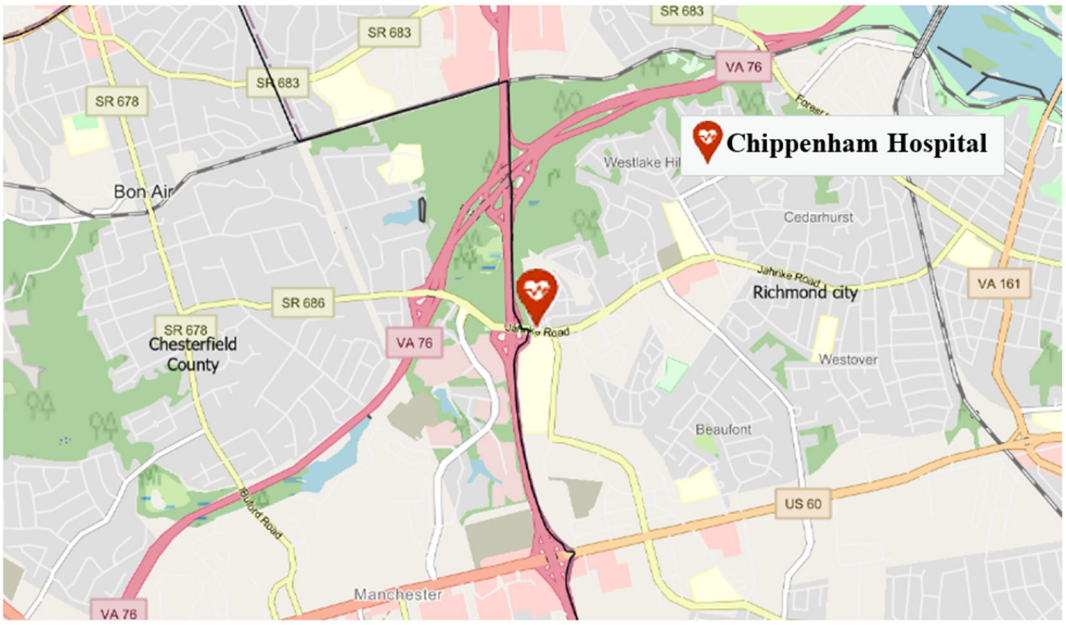
Location	Population in Poverty	Total Population	Poverty Percentage
Charles City County	746	6,544	11.4%
Chesterfield County	27,250	383,803	7.1%
Goochland County	1,897	27,493	6.9%
Hanover County	6,949	113,918	6.1%
Henrico County	34,434	334,311	10.3%
New Kent County	1,179	26,795	4.4%
Powhatan County	2,107	31,448	6.7%
City of Richmond	40,639	223,291	18.2%
PD 15	**115,201**	**1,147,603**	**10.0%**
Virginia	**839,669**	**8,568,051**	**9.8%**

Source: US Census SIAPE (2024)

The City of Richmond has a poverty percentage of 18.2%, over double the rate of the state and slightly less than double the rate of the PD (**Table 6**). The City's total population makes up approximately 19.5% of the PD's and 2.6% of Virginia's population as well. As stated above, the

City of Richmond has the third largest population in the PD and is expected to continue to grow to a total population of 245,437 in 2030 (**Table 1**). The estimated population in 2024 is less than the linear projection of the data based on the Weldon-Cooper 2030[22] estimate, with around 19,850 fewer people living in the City in 2024 than estimated. This indicates that the population is growing at a slower rate than originally projected in 2020.

Map 2: Transportation near Chippenham Hospital



Source: ArcGIS, DCOPN Inventory

Map 2 shows the site of the proposed project at the intersection of Chippenham Parkway (State Route 150) and Jahnke Road (Highway-686). There is also access from Midlothian Turnpike (US-60) and Powhite Parkway (State Route 76). For patients providing their own transportation, there are parking lots across the campus, with disability parking spaces provided, and a drop-off area at the hospital's doors.

The proposed location is also along Greater Richmond Transit Company (GRTC) routes. There is one main bus route servicing the hospital directly and much the City of Richmond south of the James River and southeastern Henrico. There is a second route less than two miles from the main campus which focuses services on the City of Richmond above the James River[23]. For passengers with disabilities that prevent them from traveling independently on the bus routes, GRTC also offers Community Assisted Ride Enterprise (CARE). CARE offers services along the fixed routes and passengers only need an ADA Paratransit photo ID card to use. There is no cost for any of GRTC's services and services are provided every day from 5 am to 1 am.

[22] The 2020-2030 Weldon-Cooper population estimates, based on a linear growth rate over the 10 years, indicate population of 243,141 in Henrico County in 2024. The SAIPE 2024 data showed a population of around 223,291 people- a difference of 19,850 people.
[23] GRTC. "Bus Routes- GRTC." *Greater Richmond Transit Company.* 2026. www.ridegrtc.com/maps-and-schedules/system-map/

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.

The Executive Committee at Chippenham & Johnston Willis wrote in support of the proposed project stating that the additional CT scanner would allow for the continued provision of care in a timely manner. DCOPN also received three letters of support from the community. The letters, in aggregate, state:

- The scanner proposed would provide more efficient care with less radiation exposure than previous scanners.
- CT services are "critical to giving patients the best chance at a successful recovery."
- The existing CT scanners at Chippenham are highly utilized.

Other than the letters written above, there were no other comments of support. There is no known opposition to the project.

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-8896 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 July 10, 2026. The public comment period closed on August 24, 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.

Chippenham Hospital is authorized for two new freestanding imaging facilities, each with a CT scanner[24]. In the applications for each facility, it was stated that one of the reasons for the projects were to decant volumes from the hospital. As neither facility has started reporting volumes, an alternative to the proposed project would be to wait to see the volume shift once the freestanding facilities are open. However, DCOPN does note that the freestanding facilities will provide outpatient services only, with acute cases continuing to receive care at the hospital, and

[24] COPN No. VA-04840 authorizes one CT scanner at Bridge ER. COPN No. VA-04989 authorizes one CT scanner at South Richmond ER. Estimated dates for the start of services are listed above.

that even upon completion of the authorized projects there is a deficit of 7 CT scanners. In 2025, Chippenham Hospital had a utilization rate of 272.7% of the SMFP threshold for expansion.

(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 IV designated by the Virginia Department of Health to serve as the Health Planning Agency for the northwestern Virginia region. Therefore, this consideration is not applicable to the review of either proposed project.

(iv) Any costs and benefits of the project.

As stated above, the expected cost of the proposed project is $5,003,461. This includes all equipment needed and construction costs. Recently authorized projects for the addition of CT scanners to existing medical facilities include COPN No. VA-04968, which had a total capital cost of $1,696,090, and COPN No. VA-04922, which had a total capital cost of $3,484,561. The proposed project has a significantly higher capital cost than other recent projects. When asked about the difference in capital cost between the proposed project and recently authorized, counsel for the applicant sited the technologically advanced CT scanner being proposed and increased cost of completing renovations in a hospital still providing services[25].

Table 5: Capital Cost *(as shown above)*

Direct Construction	$	2,003,145
Equipment not in Construction	$	2,890,259
Site Acquisition and Preparation	$	7,957
Architectural Fees	$	102,100
Engineering and Consultant Fees	$	-
Total Cost	**$**	**5,003,461**

Source: COPN Request No. VA-8896

The applicant states that "timely care is essential for CT imaging, and the addition of a fourth CT scanner is necessary to ensure that Chippenham has the resources it needs to continue to provide appropriate care for its patients." Due to Chippenham Hospital providing acute care as a Level I Trauma center, the additional scanner will allow for the hospital to provide imaging services to emergent cases as well as scheduled procedures.

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

In accordance with Section 32.1-102.4.C of the Code of Virginia, should the proposed project receive approval, the project will be conditioned to provide a level of charity care based on gross patient revenues derived from CT imaging services that is no less than the equivalent average for charity care contributions in HPR IV.

[25] Email from T. Stallings. "COPN Request No. VA-8896 Capital Costs". 20 August 2026.

Table 7: 2024 Charity Care Contributions at or below 200% of Federal Poverty Level

HPR IV	Gross Patient Revenue	Charity Care	% of Gross Patient Revenue
Inpatient Hospitals			
Encompass Health Rehab Hosp of Petersburg	$ 35,558,767	$ 1,308,642	3.7%
Sentara Halifax Regional Hospital	$ 327,271,181	$ 7,067,762	2.2%
Bon Secours Southern Virginia Regional Medical Center	$ 269,252,865	$ 5,288,471	2.0%
Bon Secours St. Francis Medical Center	$ 1,701,025,863	$ 31,217,891	1.8%
Sheltering Arms Institute	$ 192,018,830	$ 3,216,579	1.7%
Bon Secours Richmond Community Hospital	$ 1,365,231,628	$ 18,873,667	1.4%
Bon Secours St. Mary's Hospital	$ 3,029,648,941	$ 39,467,281	1.3%
CJW Medical Center HCA	$ 11,840,238,948	$ 123,924,990	1.0%
Bon Secours Southside Regional Medical Center	$ 2,820,829,311	$ 28,237,470	1.0%
TriCities Hospital HCA	$ 1,474,696,049	$ 14,176,839	1.0%
Henrico Doctors' Hospital HCA	$ 7,780,639,272	$ 59,835,274	0.8%
VCU Health System	$ 9,030,145,019	$ 63,013,672	0.7%
Poplar Springs Hospital UHS	$ 88,666,484	$ 493,078	0.6%
Bon Secours Memorial Regional Medical Center	$ 2,044,616,572	$ 9,753,595	0.5%
Centra Southside Community Hospital	$ 415,397,324	$ 1,821,204	0.4%
VCU Community Memorial Hospital	$ 448,298,275	$ 1,239,044	0.3%
Encompass Health Rehab Hosp of Virginia	$ 32,375,170	$ 2,350	0.0%
Select Specialty Hospital - Richmond	$ 192,901,481	$ -	0.0%
Cumberland Hospital for Children and Adolescents UHS	$ 29,398,596	$ -	0.0%
Total Inpatient Hospitals:			**19**
HPR IV Total Inpatient $ & Mean %	**$ 43,118,210,576**	**$ 408,937,809**	**0.9%**

HPR IV	Gross Patient Revenue	Charity Care	% of Gross Patient Revenue
Outpatient Centers			
American Access Care of Richmond	$ 6,271,285	$ 83,974	1.3%
Boulders Ambulatory Surgery Center HCA	$ 206,880,229	$ 2,653,240	1.3%
VCU Health Neuroscience, Orthopedic and Wellness Center	$ 78,434,508	$ 608,160	0.8%
Virginia Eye Institute, Inc.	$ 64,339,818	$ 455,572	0.7%
St. Mary's Ambulatory Surgery Center	$ 62,609,653	$ 305,241	0.5%
MEDRVA Stony Point Surgery Center	$ 59,309,363	$ -	0.0%
Urosurgical Center of Richmond	$ 47,080,875	$ -	0.0%
MEDRVA Surgery Center @ West Creek	$ 13,820,435	$ -	0.0%
Cataract and Refractive Surgery Center	$ 9,845,331	$ -	0.0%
Skin Surgery Center of Virginia	$ 1,708,546	$ -	0.0%
Virginia ENT Surgery Center	Not Reported	$ -	
Virginia Beach Health Center VLPP	Not Reported	$ -	
Total Outpatient Hospitals:			**10**
HPR IV Total Outpatient Hospital $ & Mean %	**$ 550,300,043**	**$ 4,106,187**	**0.7%**
Total Hospitals:			**29**
HPR IV Total $ & Mean %	**$ 43,668,510,619**	**$ 413,043,996**	**0.9%**

Source: VHI Data (2024)

Chippenham & Johnston-Willis proffered a 0.9% charity care in the application (**Table 7**). This is consistent with the HPR average and will be applied to the certificate should the application be approved. In 2024, Chippenham & Johnston-Willis reported a charity care provision of approximately 1.0% of its gross patient revenue.

(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 the 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 criteria/standards for the establishment or expansion of CT imaging services. They are as follows:

Part 1.
Definitions and General Information

12VAC5-230-80. When institutional expansion needed.

A. Notwithstanding any other provisions of this chapter, the commissioner may grant approval for the expansion of services at an existing medical care facility in a health planning district with an excess supply of such services when the proposed expansion can be justified on the basis of a facility's need having exceeded its current service capacity to provide such service or on the geographic remoteness of the facility.

B. If a facility with an institutional need to expand is part of a health system, the underutilized services at other facilities within the health system should be reallocated, when appropriate, to the facility with the institutional need to expand before additional services are approved for the applicant. However, underutilized services located at a health system's geographically remote facility may be disregarded when determining institutional need for the proposed project.

C. This section is not applicable to nursing facilities pursuant to § 32.1-102.3:2 of the Code of Virginia.

D. Applicants shall not use this section to justify a need to establish new services.

Figure 1: Chippenham & Johnston-Willis Health System Fixed CT Scanners *(as shown above)*

Scanners Reporting Volumes to VHI (2025)

Facility Name	Total Units	Total Procedures	Utilization
Chippenham Hospital	3	60,531	272.7%
ED - Swift Creek ER	1	39,904	179.7%
Johnston-Willis Hospital	3	7,938	107.3%
Scanners Reporting	**7**	**108,373**	**209.2%**

Scanners Authorized and not Reporting

Facility Name	Additional Scanners	Authorizing Certificate	Expected Start
ED- Iron Bridge	1	VA-04840	June 2026
ED- South Richmond	1	VA-04989	December 2028
Scanners Not Reporting	**2**		
Total VCU Authorized Scanners	**9**		

Utilization with All Chippenham & Johnston- Willis Authorized Projects and 2025 Volume

Facility Name	Total Units	Total Procedures	Utilization
Authorized Projects and 2025 Volume	9	108,373	162.7%

Source: VHI Data, DCOPN Records

(A) In 2025, Chippenham Hospital scanners operated at 250.3% of the SMFP threshold for MRI expansion. The applicant states that the facility operated at approximately 272.7% in 2025 with a volume of 60,531 with the three authorized scanners.

(B) Chippenham Hospital is within the Chippenham & Johnston-Willis health system. **Figure 1** shows the other facilities in PD 15 operating within the same system. There are seven authorized scanners that reported utilization in 2025, the last year for which data is available. Among the seven scanners, there was a volume of 100,978 procedures for a utilization volume of 194.9% of the SMFP threshold. Each facility reporting in the year was operating above 100%, showing that there is not an underutilized scanner in the health system that can be relocated. Two additional scanners have been authorized but have not yet started services.

(C) The applicant is not a nursing facility. (D) The proposed project is not to establish new services but expand existing CT imaging services at Chippenham Hospital.

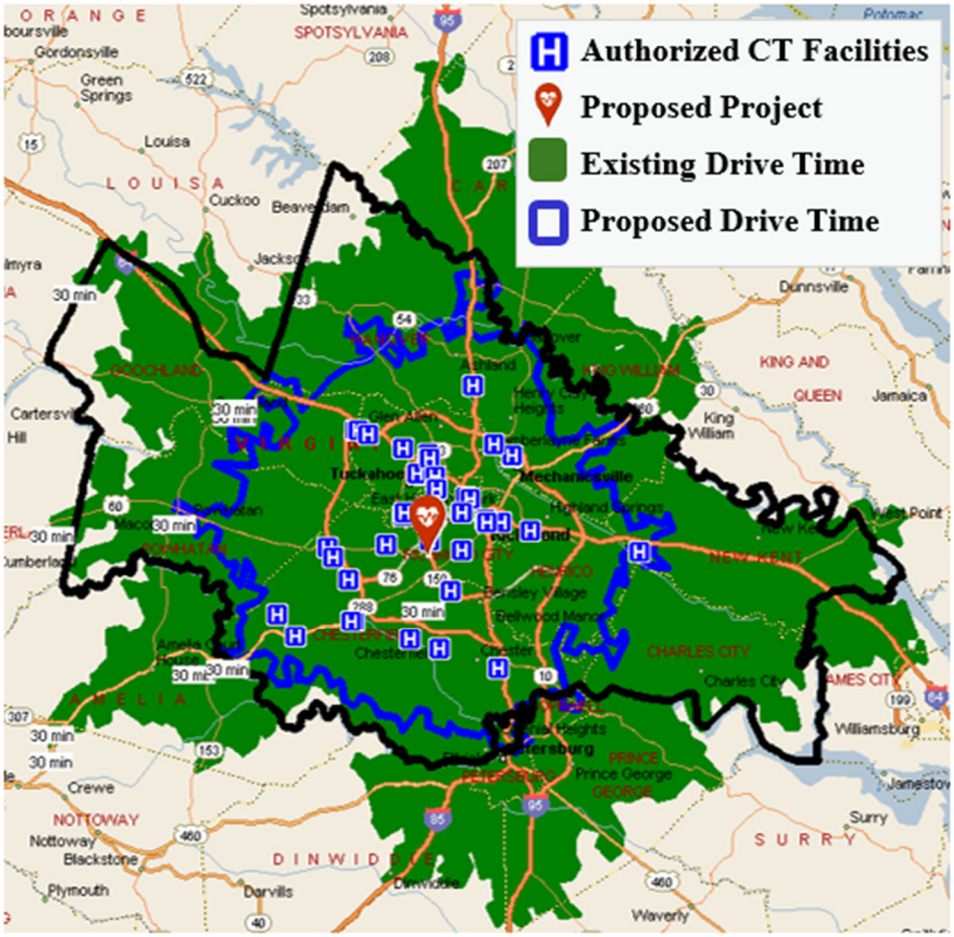
Article 1
Criteria and Standards for Computed Tomography

12VAC5-230-90. Travel time.

CT 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 geographic access of CT services in the PD within a 30-minute driving period. The existing accessibility is shown in green, with providers indicated by the blue "H" symbol. The proposed location of Chippenham Hospital is shown with the red tag, and the access within 30-minutes driving time under normal conditions is highlighted by the blue outline.

Map 3: Geographic Access of CT Scanners within 30 Minutes



Source: Microsoft Streets and Trips (2008), DCOPN Inventory

With the existing providers, 95% of the PD's population is within 30 minutes of a one-way drive from CT imaging services. The proposed project will not add to the geographic accessibility of the PD as the scanners will be added to an existing facility already providing CT services.

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.

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**.

This criterion does not apply as the proposed project is not for the establishment of a new fixed or mobile service. It is an expansion of an existing fixed service.

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.

The 49 authorized CT scanners in PD 15 performed a total of 496,060 scans in 2025, this equates to an average of approximately 10,124 scans. Should the 2025 volume stay consistent through the completion of all CT projects, there would be an average of 8,268 scans on the 60 authorized scanners.

To determine the needed number of CT scanners in the PD, the total number of scans completed in the most recent year of data (496,060 procedures) was divided by the SMFP expansion threshold (7,400). This calculation determined that there is a need for 67.0, or 67 CT scanners in the PD. As there are 60 CT scanners currently authorized, this leaves a deficit of 7 scanners.

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 scanner and that the proposed conversion will not significantly reduce the utilization of existing CT providers in the health planning district.

This criterion does not apply to the proposed project. The applicant is not proposing mobile CT services.

12VAC5-230-130. Staffing.

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

The applicant states that CT services will continue to be provided "under the direction and supervision of Radiology Associates of Richmond."

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.**

The proposed project is not projected to impact institutional competition but rather increase access to the existing Chippenham Hospital's CT imaging services. The applicant states that the proposed project is to meet the public demand for these services and decrease the wait times for imaging services.

Table 8: Breakdown of CT Unit Ownership in PD 15

Health Systems	Fixed Scanners	Authorized Percentage
HCA Healthcare	19	31.7%
Chippenham & Johnston-Willis	*8*	*13.3%*
Bon Secours Richmond	15	25.0%
Virginia Commonwealth University Health Systems Authority	16	26.7%
Other Providers	10	16.7%
Authorized CTs	**60**	

Source: DCOPN Inventory

Among owners of CT scanners in PD 15, there are three main health systems with 83.3% of the 60 authorized CT scanners (**Table 8)**. V Virginia Commonwealth University Health Systems Authority has 16 CT scanners authorized (26.7%), Bon Secours Richmond Health System has 15 CT scanners authorized (25.0%), and HCA Health Services of Virginia has 19 CT scanners authorized (31.7%). The remaining 10 CT scanners (16.7%) are authorized to various providers in the PD. As stated, prior, Chippenham & Johnston-Willis is a subsidiary of the HCA health system. Chippenham & Johnston-Willis is authorized for 9 CT scanners[26] at each location (approximately 15.0%). At this time, there is not an unhealthy market concentration of CT scanners within PD 15, and the proposed project would not create one.

[26] Once the CT scanner currently operating at Swift Creek ER is relocated upon the opening of Magnolia Hospital, Chippenham & Johnston-Willis will have approximately 13.3% of the CT scanners in PD 15.

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.

In 2025, there was an overall CT utilization of 136.8% in PD 15 among the 49 CT scanners reporting to VHI in the year. There are currently authorized 60 CT scanners in the PD and a deficit of 7 CT scanners per the volumes reported in 2025.

Chippenham & Johnston-Willis hospital was authorized for a freestanding imaging center to decant CT imaging services volumes with COPN No. VA-04989. This is the third freestanding imaging center with a CT scanner authorized to Chippenham & Johnston-Willis[27]. Despite the authorized facilities, there does appear that an additional CT scanner is needed to meet imaging demands at Chippenham Hospital. Should the volume stay consistent with that of 2025, Chippenham Hospital and three freestanding facilities will have a utilization of 154.2% when all authorized projects are completed.

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 applicant estimates a net income of $19,802,075 in the first year of operations and $22,098,111 in the second year (**Table 9)**. This total includes the services of the existing scanners as well as the proposed project. The net income does show financial feasibility.

Table 9: Pro Forma Projection (Proposed Project and Existing)

	Year 1	Year 2
Gross Patient Revenue	**$ 915,007,575**	**$ 1,054,287,777**
Contractual Discounts and Bad Debt	$ (867,427,179)	$ (1,001,546,497)
Charity Care (0.9%)	*$ (8,235,068)*	*$ (9,515,481)*
Total Deductions	$ (875,662,247)	$ (1,011,061,978)
Operating Revenue	**$ 39,345,328**	**$ 43,225,799**
Operating Expenses	$ (19,543,253)	$ (21,127,688)
Net Income	**$ 19,802,075**	**$ 22,098,111**

Source: COPN Request No. VA-8896

For the proposed project, there will be a need for the hiring of 8.9 full-time equivalent (FTE) staff. Each of these staff members will be radiological technologists. The hospital currently has 26.4 FTE radiological technologist vacancies which has DCOPN concerned regarding the long-term feasibility of staffing; however, the parent company of HCA has a partnership with Brightpoint Community College which launched a 2-year radiology school on Chippenham's campus. The first class of students graduated in May 2026. The hospital also has 30.4 radiological technologist positions filled. The applicant states that there are no anticipated concerns about hiring additional staff.

7. The extent to which the project provides improvements or innovations in the financing and delivery of health services, as demonstrated by:

[27] The two other facilities are Swift Creek ER (with the scanner set to be relocated to Magnolia Hospital) and the Chesterfield ER authorized by COPN NO. VA-04840.

(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 proposed project does not introduce new technology. (ii) The proposed project will not solely provide services on an outpatient basis. (iii) The applicant did not state any cooperative efforts. The hospital is partnered with various education programs, including a partnership with a community college for a 2-year radiology school. The first class graduated in May 2026. (iv) There are no other factors for the Commissioner to consider.

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.**

This is not applicable. The applicant is not a teaching hospital associated with a public institution of higher education or a medical school in the area to be served. The facility does partner with colleges and universities

DCOPN Facts and Findings

Chippenham & Johnston-Willis Hospitals, Inc. (Chippenham & Johnston-Willis) is applying for the addition of one CT scanner to Chippenham, for a total of four CT scanners at the hospital. Should the proposed project be completed, the extended CT services will be able to begin 14 months after receiving the certificate.

The proposed project is located at the intersection of Chippenham Parkway (State Route 150) and Jahnke Road (Highway-686), and it is along Greater Richmond Transit Company (GRTC) routes. DCOPN received three letters of support from the community and one letter from the Executive Committee of Chippenham & Johnston-Willis. There is no opposition to the proposed project. The expected cost of the proposed project is $5,003,461, that is significantly higher than recently authorized projects of similar nature. The applicant included a charity care rate equal to that of the HPR (0.9%) that will be applied to the certificate should the proposed project be approved.

The proposed project will not add to the geographic accessibility of the PD as the scanners will be added to an existing facility already providing CT services. There is a need for 67 CT scanners in the PD. As there are 60 CT scanners currently authorized, this leaves a deficit of 7 scanners. The proposed project is not projected to impact institutional competition but rather increase access to the existing Chippenham Hospital's CT imaging services. DCOPN does not know of a reasonable alternative that will serve the population in a more effective or effective manner. The project shows feasibility in terms of financial and human resources.

DCOPN Staff Recommendations

The Division of Certificate of Public Need recommends **conditional approval** of Chippenham & Johnston-Willis, Inc.'s Certificate of Public Need Request number VA-8896 to establish a specialized care facility for the provision of CT imaging services for the following reasons:

1. The project to add one CT to Chippenham Hospital is generally consistent with the standards and criteria of the State Medical Facilities Plan and the 8 Required Considerations of the Code of Virginia.
2. The project appears to be feasible in terms of financial and human resources.
3. Existing volumes and utilization at Chippenham Hospital demonstrates an institutional need.
4. No reasonable alternative has been identified that serves the population in a more effective or efficient manner, and the proposal is more beneficial than the status quo.
5. There is a deficit of CT scanners in the PD.
6. There is no known opposition to the project.

DCOPN's recommendation is contingent upon Chippenham & Johnston-Willis Hospitals, Inc.'s agreement to the following charity conditions:

Chippenham & Johnston-Willis Hospitals, Inc. will provide CT imaging services to all persons in need of this service, regardless of their ability to pay, and will facilitate the development and operation of primary medical care services to medically underserved persons in an aggregate amount equal to at least 0.9% of Chippenham & Johnston-Willis Hospitals, Inc.'s gross patient revenue derived from CT imaging services. 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.

Chippenham & Johnston-Willis Hospitals, Inc. will provide CT imaging services 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, Chippenham & Johnston-Willis Hospitals, Inc. will facilitate the development and operation of primary and specialty medical care services in designated medically underserved areas of the applicant's service area.