



COMMONWEALTH of VIRGINIA

B. Cameron Webb, MD, JD
State Health Commissioner

Department of Health
P O BOX 2448
RICHMOND, VA 23218

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

February 16, 2026

Carol Burchett
Fairfax Radiology Centers
8260 Willow Oaks Corporate Drive
Fairfax, Virginia 22031

**RE: COPN No. VA-04969 (COPN Request No. VA-8848)
IRMC, LLC
Fairfax, Virginia
Introduce MRI in an existing medical care facility**

Dear Ms. Burchett:

In accordance with Chapter 4, Article 1.1 of Title 32.1 of the Code of Virginia of 1950 (the Code), as amended, I reviewed the application and all supporting documents submitted by IRMC, LLC to Introduce MRI in an existing medical care facility located at 8503 Arlington Boulevard, Suite LL-100 M, Fairfax Virginia, 22031.

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

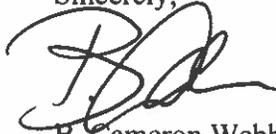
1. The proposal is generally consistent with the applicable standards and criteria of the State Medical Facilities Plan and the 8 Required Considerations of the Code of Virginia.
2. There is a calculated need for one (1) MRI scanner in PD 8, which Inova Reston MRI Center can supply.
3. Since Inova Reston MRI Center is an established and highly utilized provider the proposed project is unlikely to have a significant impact upon the utilization, costs, or charges of other providers of MRI services in PD 8.
4. The capital costs of the proposed project are reasonable and it is viable in the immediate and long-term.

5. There is no identified alternative to the proposed project and it is more beneficial than the status quo.
6. HSANV recommended approval of the project.
7. There is no known opposition to the project.

This certificate is valid for the period February 16, 2026, through February 15, 2027. The total authorized capital cost of the project is \$3,777,642.

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

Sincerely,



B. Cameron Webb, MD, JD
State Health Commissioner

Enclosure

cc: Charis A. Mitchell, Assistant Attorney General, Commonwealth of Virginia
April Dovel, Director, VDH, Office of Licensure and Certification
Antwon Jacobs, Supervisor, Division of Certificate of Public Need
James Jenkins, Deputy Director, VDH, Office of Licensure and Certification
Dean Montgomery, Executive Director, Health Systems Agency of Northern Virginia
Deborah K. Waite, Chief Operating Officer, Virginia Health Information
Gloria Addo-Ayensu, MD, MPH, Fairfax County Health District

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HEALTH

MEDICAL CARE FACILITIES CERTIFICATE OF PUBLIC NEED

THIS CERTIFIES THAT Inova Reston MRI Center, LLC, is authorized to initiate the proposal as described below.

NAME OF FACILITY: IRMC, LLC d/b/a Prosperity MRI Center

LOCATION: 8503 Arlington Boulevard, Suite LL-100 M, Fairfax Virginia, 22031

OWNERSHIP AND CONTROL: Inova Reston MRI Center, LLC

SCOPE OF PROJECT: Introduce MRI in an existing medical care facility located at 8503 Arlington Boulevard, Suite LL-100 M, Fairfax Virginia, 22031. Capital costs authorized for this project total \$3,777,642. The project is expected to be completed by May 18, 2027. This certificate is issued with the condition that appears on its reverse.



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

Certificate Number: VA-04969

Date of Issuance: February 16, 2026

Expiration Date: February 15, 2027

A handwritten signature in black ink, appearing to read "B. Cameron Webb".

B. Cameron Webb, MD, JD, State Health Commissioner

This project shall be subject to the system-wide charity care condition applicable to Inova Health Care Services d/b/a Inova Health System pursuant to COPN No. VA-04381 (issued April 2, 2013), as amended by the State Health Commissioner by letter dated January 4, 2016 (the Inova System-Wide Condition). Pursuant to the 2016 reconsideration, the Inova System-Wide Condition reset to 3.9% as of January 1, 2022. Provided, however, that charity care provided under the Inova System-Wide condition shall be valued under the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq.

Inova Health System will accept a revised percentage based on the regional average after such time regional charity care data valued under the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq. is available from Virginia Health Information. In addition to any right to petition the Commissioner contained in the Inova System-Wide condition, to the extent Inova Health System expects its Inova System-Wide condition as valued under the provider reimbursement methodology utilized by the Centers for Medicare and Medicaid Services for reimbursement under Title XVIII of the Social Security Act, 42 U.S.C. § 1395 et seq. or any revised percentage to materially alter the value of its charity care commitment thereunder, it may petition the Commissioner for a modification to the Inova System-Wide condition to resolve the expected discrepancy.