

**Health Systems Agency of Northern Virginia
Board of Directors Meeting
June 8, 2026**

Members Present

Patricia Deitos, RN
Cody Hennelly
Pamela Kincheloe, RN, Chairperson
Patrice Lepczyk
Douglas Samuelson
Robert Sharpe
James Smith, III MD
Jennifer Weber

Staff Present

Ann McFeeley
Dean Montgomery

Guests (Partial List)

Anther Anis, MD, President, Heart and Vascular Specialists
Nicholas Beck, Attorney
Ken Bernard, M.D. Chief Clinical Officer, Haymarket Medical Center and Prince William MC
Lance Boyd, CEO, Fairfax Radiological Consultants
Elizabeth Breen, Hunton Andrews Kurth, Counsel, Inova Health System
Carol Burchett, Chief Strategy Officer, Fairfax Radiology Consultants
Kendrel Cabarrus, Strategic Consultant, UVA Health System Strategy
Raj Chand, MD, President of Inova Fair Oaks Hospital, Emergency Medicine physician
Paul Dreyer, Senior Director, Strategy & Planning, Inova Health System
David Dubois, President, PET of Reston
Robert Harrison Gibbs, Counsel, Rayus Radiology
Alison Haines, Senior Director, Growth & Development, UVA Community Health
Mary Anne Harkins, Principal Consultant, Harkins Consulting LLC
Mark Lainoff: Director of Business and Market Development for Inova Health System.
Jennifer Ligon, Williams Mullen, Counsel, UVA Community Health
Karan Lotfi, MD, Principal, PET of Reston
Patrick Oliverio, MD, Fellowship training Diagnostic Radiologist, President of Fairfax Radiological Consultants, and Inova Health System's Division Chief for Diagnostic Radiology
Jessica Parker, Senior Director, Strategy & Planning, Inova Health System
Betsy Reilly, Business Analyst, JHU Healthcare
Erik Shannon, CEO, UVA Community Health]
Ross Snare, Associate Chief, External Affairs, UVA Health
Kendall Theissen, CDL Nuclear Technologies
Ifeoma Ugonabo, MD, Inova Cardiology – Gainesville
Amanda Welch, VP Chief Operating Officer, UVA Health Haymarket Medical Center
Spencer Wildonger, Director of Planning, Transformation, JHU Medicine

I. Call to Order

Pam Kincheloe, RN, Chairperson, Health Systems Agency of Northern Virginia (HSANV), called the meeting to order at 7:30 PM. She welcomed guests and reviewed the agenda.

Kincheloe stated that, among other matters, the board would consider four certificate of public need (COPN) applications:

- **Heart and Vascular Specialists, Establish PET-CT Service, COPN Request VA-8876**
- **IRMC, Establish PET-CT Service, COPN Request VA-8890**
- **Inova Fair Oaks Hospital, Establish CT Service, COPN Request VA-8881**
- **IFRC, Establish CT Service, COPN Request VA-8889**

She said, without objection, the two PET proposals would be considered first. The board would then consider the CT scanner proposals.

II. Previous Minutes

The board approved minutes of the May 11, 2026, meeting.

III. COPN Applications:

- **Heart and Vascular Specialists, Establish PET-CT Service, COPN Request VA-8876**
- **IRMC, Establish PET-CT Service, COPN Request VA-8890**

Conflict of Interest Query

Kincheloe followed HSANV conflict of interest procedures to determine whether any member had a conflict of interest on either application. No conflicts were declared, alleged, or otherwise identified.

Heart and Vascular Specialists Presentation, COPN Request VA-8876

Anther Anis, MD, President, Heart and Vascular Specialists (HVS), presented the proposal. He emphasized the clinical value of cardiac PET-CT and calcium score imaging in diagnosing, treating and managing cardiovascular patients.

The information Anis presented is attached (Attachment 1)

Board & Staff Questions, Discussion

In response to questions Anis stated or confirmed that:

- There is little referral of patients between and among cardiology practices. HVS clinicians and patients do not have access to other recently authorized cardiac PET services, other than hospital-based programs.
- The HVS scanner will be used to serve HVS patients. The projected service volume will come largely from within the practice and, over time, from local primary care and general practice physicians.

- The equipment lease and operating agreement with CDL Nuclear Technologies minimizes the HVS capital investment, potentially eliminating it entirely.
- Coronary artery calcium (CAC) screening is of increasing value and utility in cardiovascular care.
- Diagnostic use of HVS's CT scanners independent of cardiac PET imaging will be limited to coronary artery calcium scoring. The CT scanning capability will not be used in general diagnostic imaging.

Public Comment

There was no public comment other than the letters of support submitted with the application. There is no known opposition to the project.

Final Summary

Anis thanked the board for its consideration of the application.

IRMC Presentation, COPN Request VA-8890

Elizabeth Breen, Counsel to Inova Health System, introduced herself and others present to discuss the application: Lance Boyd, CEO, Fairfax Radiological Consultants, Patrick Oliverio, MD, President, Fairfax Radiological Consultants; and Carol Burchett, Chief Strategy Officer, Fairfax Radiological Consultants.

Breen, Boyd, Oliverio, and Burchett presented the application. They noted the increasing utility and value of PET imaging in a widening array of clinical applications, especially in neurology and in diagnosing and treating prostate cancer. The information presented is summarized in the slides referenced during their testimony (Attachment 2). Among other considerations, the presenters stated:

- PET-CT imaging is the preferred diagnostic imaging option for an expanding array of acute care patients. Demand for the service is growing rapidly regionwide.
- IRMC's two PET-CT services are used heavily and soon will be operating at capacity.
- Based on those now served at its Fairfax County locations, adding a service in Loudoun County is the best option for meeting the needs of the communities IRMC serves.
- The capital cost of the project is within the range commonly seen for similar projects.
- There is no indication or expectation that the project would affect the use of other local PET-CT services.

The information IRMC representatives presented is attached (Attachment 2)

Board & Staff Questions, Discussion

In response to questions IRMC representatives indicated that:

- The recently opened IRMC PET scanner in Centreville, VA is already heavily used and will soon reach capacity. Average use of its two scanners is already more than 3,000 patient visits per scanner, which is near practical operating capacity.
- Demand for PET imaging is expected to continue to grow as clinical indications for its use increase.

- The most appropriate response to increasing demand is to establish a complementary service within the service areas of its existing services.
- Given the large IRMC primary service area, a complementary PET service in Lansdowne (northern Loudoun County) is expected to improve scheduling and access.

Public Comment

Karan Lotfi, MD, representing PET of Reston which maintains a full-time fixed site service with four MI scanners near Reston Hospital Center. spoke against the IRMC proposal. He said PET of Reston serves residents of Loudoun County, has upgraded its service, and has capacity to serve many more patients. He noted that the second IRMC PET system opened recently in Centreville, VA is not yet operating at capacity. Consequently, the proposal is premature.

In response to questions, Lotfi indicated that with recent upgrades PET of Reston can serve more than 4,000 patients per scanner annually.

Applicant Final Summary

Elizabeth Breen thanked the board for its consideration of the application. She offered to answer any additional questions.

Staff Recommendations, COPN Request VA-8876 & COPN Request VA-8890

Dean Montgomery referred members to the agency staff report on the applications. He noted that though technically deemed competing applications, the Heart and Vascular Specialists and IRMC proposals are not competing, for patients or economically. They serve distinct, separate patient populations.

Based on the data and information presented in the agency staff report on the applications, on the service and practice specific service volume of each, and on the testimony presented by the applicants, Montgomery recommended approval of both applications, notwithstanding the PET of Reston critique of the IRMC application.

Board Deliberation and Vote, COPN Request VA-8876

James Smith offered a motion to recommend approval of COPN Request (VA-8876). Patricia Deitos seconded the motion. The motion passed by a vote of eight in favor (Deitos, Hennelly, Kincheloe, Lepczyk, Samuelson, Sharpe, Smith, Weber) and no one opposed.

Board Deliberation and Vote, COPN Request VA-8890

James Smith offered a motion to recommend approval of COPN Request, VA-8890. Patricia Deitos seconded the motion. The motion passed by a vote of eight in favor (Deitos, Hennelly, Kincheloe, Lepczyk, Samuelson, Sharpe, Smith, Weber) and no one opposed.

IV. COPN Applications:

- Inova Fair Oaks Hospital, Establish CT Service, COPN Request VA-8881
- IFRC, Establish CT Service, COPN Request VA-8889

Conflict of Interest Query

Kincheloe followed HSANV conflict of interest procedures to determine whether any member had a conflict of interest on the applications. She declared a conflict with the Inova Fair Oaks Hospital application. No other conflicts were declared, alleged, or otherwise identified.

Inova Fair Oaks Hospital Presentation

Elizabeth Breen, Counsel to Inova Health System, introduced herself and others present to discuss the application: Mark Lainoff: Director of Business and Market Development, Inova Health System; Raj Chand, MD, President of Inova Fair Oaks Hospital; Patrick Oliverio, MD, Inova Health Systems. Diagnostic Radiology Division Chief; Ifeoma Ugonabo, MD, Inova Cardiology – Gainesville.

Among other considerations, they stated that:

- Inova Fair Oaks Hospital (IFOH) has an institutional need to expand CT scanning capacity. Its three scanners are heavily used. Recent caseloads exceed the nominal service volume standard by nearly 150%.
- IFOH proposes to add a CT scanner at a satellite emergency department and outpatient care complex, within its primary service area, in Gainesville, Virginia.
- The project is inventory neutral. It entails the replacement and relocation of the dated Mark Center CT scanner Inova operates in Alexandria, VA. The Mark Center CT service will be closed with the transfer.
- The Gainesville emergency department and imaging services are needed to serve existing Inova Health System patients from western Prince William County.
- Projected capital costs are within the capital expenditure range seen for similar projects.
- The project is consistent with applicable Virginia SMFP service planning considerations.

The information IRMC representatives presented is attached (Attachment 3, pages/slides 1-8)

Board & Staff Questions, Discussion

In response to questions Breen, Lainoff, Chand, Oliverio and Ugonabo indicated that:

- IFOH believes that the applicable Virginia SMFP public need calculation shows a need for up to
- twenty-five CT scanners. This calculation is based on the number of reported CT procedures/scans in 2024, rather than the number of CT patient visits.
- The Gainesville location is within the primary service area of IFOH.
- The Gainesville outpatient care center and satellite emergency department will be undertaken if the CT project is not authorized.
- The project is consistent with recent authorizations of CT scanners to support satellite emergency department in northern Virginia and elsewhere.

Public Comment

UVA Community Health opposed the application. Erik Shannon, CEO, UVA Community Health, acknowledged IFOH's need for additional CT scanning capacity, but argued that Gainesville is not an appropriate location. He reviewed the locations and operations of three UVA Community Health services in western Prince William County, including the newly opened freestanding CT and MRI services in

Gainesville, near the proposed IFOH location. UVA Community Health believes both the satellite emergency department and the CT service are likely to affect its services negatively.

The information Shannon presented is attached (Attachment 4).

Applicant Final Summary

Paul Dreyer, Senior Director, Strategy & Planning, Inova Health System, responded to the UVA Community Health critique of the IFOH proposal. He emphasized, among other considerations, that Gainesville is within the IFOH primary service area and now serves several thousand patients from the area annually. Consequently, UVA Community Health CT services in Manassas and Haymarket have high use. Patient origin data indicates that the IFOH project is not likely to affect UVA facilities and services negatively.

The information Dryer presented is attached (Attachment 3, pages/slides 10-18).

Breen thanked the board for its consideration of the application and offered to answer any additional questions.

IFRC Presentation

Lance Boyd, CEO, Fairfax Radiological Consultants; Patrick Oliverio, MD, President, Fairfax Radiological Consultants; and Carol Burchett, Chief Strategy Officer, Fairfax Radiology Consultants presented the application.

Among other considerations, they stated that:

- The IFRC proposal to establish a CT scanning service in the Lansdowne area of Loudoun County is an inventory neutral project. It entails the replacement and relocation of IFRC's dated CT service in the City of Fairfax.
- The replacement scanner will incorporate state-of-the-art technology which will permit it to serve a wider array of patients, including those needing cardiovascular imaging.
- IFRC now has ten CT scanners regionwide, all freestanding services. Average use is at or near the Virginia SMFP service volume planning standard.
- The proposal is consistent with applicable provisions of the Virginia SMFP.

The information IFRC representatives presented is attached (Attachment 5).

Board & Staff Questions, Discussion

In response to questions Boyd, Oliverio and Burchett indicated that:

- Demand For CT scanning is increasing steadily regionwide at IFRC services with up-to-date technology regionwide. Its Fairfax City service is dated and must be replaced.
- The scanner proposed for the Lansdowne service is more expensive than some scanners reviewed recently. It incorporates advanced technology and capability that will permit accommodating a wider array of patients.

Public Comment

There was no public comment other than the letters of support submitted with the application. There is no known opposition to the project.

Final Summary

Boyd thanked the board for its consideration of the application.

Staff Recommendations: COPN Request VA-8881 & COPN Request VA-8889

Montgomery noted that though technically characterized as competing applications, the IFOH and IFRC proposals are not competing in any ordinary or meaningful sense. Though submitted by separate corporate entities, the projects would add two CT scanners to Inova Health System controlled services. Both are consistent with applicable provisions of the Virginia SMFP. Concerns raised by UVA Community Health about the IFOH proposal are legitimate and worth consideration. However, the proposal is consistent with Virginia COPN law and regulations. The project also is similar to projects authorized locally and statewide.

Based on these considerations, on the data and information presented in the agency staff report on the applications, and on the information presented earlier by the applicants, Montgomery recommended approval of both.

Board Deliberation and Vote, COPN Request VA-8881

James Smith offered a motion to recommend approval of COPN Request, VA-8881. Robert Sharpe seconded the motion. The motion passed by a vote of seven in favor (Deitos, Hennelly, Lepczyk, Samuelson, Sharpe, Smith, Weber) and one abstention (Kincheloe).

Board Deliberation and Vote, COPN Request VA-8889

Patrice Lepczyk offered a motion to recommend approval of COPN Request, VA-8876. Jennifer Weber seconded the motion. The motion passed by a vote of eight in favor (Deitos, Hennelly, Kincheloe, Lepczyk, Samuelson, Sharpe, Smith, Weber) and none opposed.

V. Other Business

The next meeting of the board will be Monday, June 15, 2026. There will be no scheduled board meeting in July 2026.

VI. Adjourn

Kincheloe adjourned the meeting at 10:05 PM.

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Dean Montgomery". The signature is fluid and cursive, with the first name "Dean" and last name "Montgomery" clearly distinguishable.

Dean Montgomery

Attachments (5)