



8-1-14

- BEHAVIORAL HEALTH CARE
- BLADEN COUNTY HOSPITAL
- CAPE FEAR VALLEY MEDICAL CENTER
- CAPE FEAR VALLEY REHABILITATION CENTER
- HEALTH PAVILION NORTH
- HIGHSMITH-RAINEY SPECIALTY HOSPITAL

---

- BLOOD DONOR CENTER
- BREAST CARE CENTER
- CANCER CENTER
- CARELINK
- CAPE FEAR VALLEY HOMECARE & HOSPICE, LLC
- CUMBERLAND COUNTY EMS
- FAMILY BIRTH CENTER
- HEART & VASCULAR CENTER
- HEALTHPLEX
- LIFELINK CRITICAL CARE TRANSPORT
- PRIMARY CARE PRACTICES
- SLEEP CENTER

July 28, 2014

Dr. Christopher Ullrich, Chair  
State Health Coordinating Council  
C/O Division of Health Service Regulation, Medical Facilities Planning Branch  
809 Ruggles Dr.  
Raleigh, NC 27603

RE: Support for Fixed to Mobile PET Conversion Policy TE-1 in the *Proposed 2015 SMFP*

Dear Dr. Ullrich:

I am the CEO of Cape Fear Valley Health System in Fayetteville, NC (Cumberland County). Our health system includes 830 licensed and CON approved beds, located in three counties. Our main tertiary hospital is located in Fayetteville and operates a full-service cancer program including Radiation and Medical Oncology, Cyber Knife, Fixed PET/CT, A Cancer Center Resource Center, Support Programs and Clinical Trials. In addition, we have a satellite cancer center called Health Pavilion North located in northern Cumberland County and offering Medical and Radiation Oncology. Our cancer patients receive state of the art treatment within close proximity of their families and friends. Cape Fear Valley Cancer Center is accredited through the American College of Surgeons Commission on Cancer with commendation as a Community Hospital Comprehensive Cancer Center.

We support and encourage the SHCC to permit the conversion of existing fixed PET scanners to mobile PET scanners in North Carolina by the inclusion of Policy TE-1. In addition, we support a modification to section four of the policy which would allow a converted mobile PET scanners to provide services in counties, other than those listed in Section 4., if they are providing services to a cancer program at a hospital under common ownership, or managed by the provider developing the converted mobile PET.

We believe this is a reasonable request and support the policy with these changes.

Sincerely,  
  
Michael Nagowski, Chief Executive Officer