

March 12, 2024

Sandra Greene, PhD Chair  
State Health Coordinating Council  
Micheala Mitchell Chief  
Andrea Emmanuel, PhD Acting Assistant Chief  
Healthcare Planning Section  
Division of Health Service Regulation  
2714 Mail Service Center  
Raleigh, North Carolina 27699-2714  
E-Mail: [DHSR.SMFP.Petitions-Comments@dhhs.nc.gov](mailto:DHSR.SMFP.Petitions-Comments@dhhs.nc.gov)

**RE: Carteret Health Care Petitions for PET/CT Simulator / Scanner Methodology or Policy Change**

Dear Dr. Greene and Dr. Emmanuel,

On behalf of myself and the people I represent in Carteret County, I ask that DHR Planning Staff recommend and that the full State Health Coordinating Council recommend one of the alternative petitions submitted by Carteret Health to change the *2025 State Medical Facilities Plan* and permit midsize cancer centers in communities like Carteret County to get a PET scanner.

As a member of the Carteret Health Care Board, I know from experience that cancer is increasing as people live longer and hazardous exposures increase. As a board member of a hospital with an ACS recognized Community Cancer Center, I am accountable to a community that wants to know what we are doing to improve it. In our county, hospital board members are elected representatives of the community.

We are happy to have access to a PET scanner. However, the mobile PET scanner is only available one day a week, on Sunday, and we always have a waiting list of about two weeks. The petition notes that the mobile scanner can only accommodate about half of the cancer PET scans. That means the other half have a big travel burden. That is not equitable, it does not address disparity issues. People who have breast and prostate cancer are just as important as those with liver and lung cancer.

Our board wants cost-effective investments, even for important technology. The proposal for dual purpose equipment is ideal.

The *State Medical Facilities Plan* standard methodology was written when PET scanners were still relatively rare in cancer treatment. Today, the State Plan should not limit the options of a mid-size cancer center to a mobile vendor that charges much more for weekday service than for weekends and has isotope restrictions. A mid-size North Carolina cancer center should have a chance to offer a full range of services.



JULIUS TAYLOR | CHAIRMAN  
KYLE MAREK | PRESIDENT

3500 ARENDELL ST. MOREHEAD CITY, NC 28557  
P | 252.499.6000

CARTERETHEALTH.ORG

The petitions give you two options. Please choose one or a variation on one. Please do not add more restrictions. They offer enough.

Thank you for your time and attention to this critical issue.

Regards,

A handwritten signature in black ink, appearing to read 'Mark Shouse', with a long horizontal flourish extending to the right.

Mark Shouse, Vice-Chairman  
Carteret Health Care Board of Directors