



**Comments on CaroMont Health Petition for a Linear Accelerator  
Special Need Determination for Service Area 6 in the  
Proposed 2026 State Medical Facilities Plan**

**COMMENTER:**

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Atrium Health, Inc. (Atrium), part of Advocate Health, is filing these comments in opposition to the CaroMont Health (CaroMont) petition to add a linear accelerator special need determination in the Proposed 2026 State Medical Facilities Plan (SMFP).

The CaroMont petition proposes multiple major changes that would be required to reasonably justify a need determination for a linear accelerator (LINAC) for Service Area 6, including ignoring the population per linac standard and reassigning two counties out of the service area. Each of these requests are more methodology related and not in line with the intent or directions for summer petitions as described on page 8 of the Proposed 2026 SMFP as indicated below.

***Summer petitions and proposals.*** *Summer petitions involve requests for adjustments to need determinations in the Proposed SMFP. Petitioners may submit a written petition requesting an adjustment to the need determination in the Proposed SMFP if they believe that special attributes of a service area or institution give rise to resource requirements that differ from those provided by the standard methodologies and policies.*

Atrium believes the petition from CaroMont exceeds the parameters of a summer petition and should be denied on that issue alone.

Further arguments for denial of the petition are based on the impending LINAC methodology work group. In recent years there have been multiple petitions submitted for consideration by the State Health Coordinating Council (SHCC) regarding deficiencies in the LINAC methodology in the SMFP. In response, the Technology and Equipment Committee convened an interested parties discussion group earlier this year. The statements below are excerpted from the Technology and Equipment Committee report at the June 4, 2025, SHCC meeting:

*Based on this meeting and further discussions with Agency staff, it became clear that the issue of an adequate supply of LINACs needs careful and systematic consideration. Therefore, Dr. Greene decided to convene a workgroup. We expect the workgroup to begin work in the Fall of this year... This committee will consider the workgroup's recommendations for inclusion in the 2027 SMFP. The committee's decision then will be forwarded to the SHCC for consideration.*

Atrium is asking the SHCC to allow the LINAC methodology workgroup scheduled to convene this fall to review and revise the current methodology before releasing any special need determinations in service areas that do not adequately demonstrate how a service area's needs are not currently being met by the methodology.

Denying the petition and allowing the LINAC methodology workgroup to complete its work and develop a revised methodology for the 2027 SMFP will not have an adverse impact on the patients of Service Area 6. The volume reported in the Proposed 2026 SMFP for the three LINACs operated by CaroMont is 22,293 ESTVs, or 7,431 ESTVs per LINAC. There are seven sites across the state currently operating above this level. Five of these sites are operating only one LINAC. Sites with more than one device have more opportunities to accommodate higher patient volume as there are natural volume fluctuations and patients are shared between devices. There are many alternative solutions for a LINAC provider to accommodate increasing demand including extended treatment hours per day and per week and schedule optimization across multiple LINACs within a facility.

Atrium believes the petition from CaroMont exceeds the parameters of a summer petition and should be denied. Atrium is asking the State Health Coordinating Council to allow the LINAC methodology workgroup scheduled to convene this fall to review and revise the current methodology before releasing any special need determinations in service areas that do not adequately demonstrate how a service area's needs are not currently being met by the methodology.