

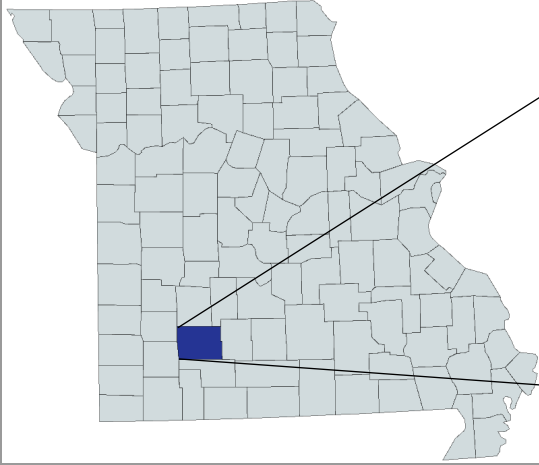
Missouri Health Facilities Review Committee  
**Certificate of Need Expedited Ballot Meeting**  
September 19, 2025

**Tentative Agenda**

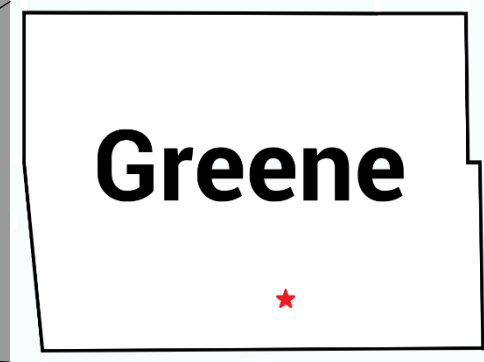
**New Business**

- |   |   |
|---|---|
| <ol style="list-style-type: none"><li>1. #6223 RT: The Homestead at Hickory View Retirement Community<br/>Washington (Franklin County)<br/>\$282,504, LTC bed expansion (Purchase 12 ALF beds)</li><li>2. #6226 HT: CoxHealth<br/>Springfield (Greene County)<br/>\$6,341,013, Replace radiotherapy system (LINAC)</li><li>3. #6202 HT: CoxHealth<br/>Springfield (Greene County)<br/>\$2,208,924, Replace CT</li></ol> | <p>Automatically deferred to the<br/>September 8, 2025 CON Meeting agenda<br/>Pursuant to 19 CSR 60-50.420 (7)(C)</p> |
|---|---|

**Replace Radiotherapy  
System (LINAC)**



**Location in Missouri**



**View of Service Area**

**Applicant:** Lester E. Cox Medical Centers (owner/operator)

**Contact Person:** John Chastain, 417-269-3108  
*John.chastain@coxhealth.com*

**Project Address:** 3850 S. National Avenue  
Springfield, 65807 (Greene County)

**Cost:** \$6,341,013

**Appl. Rec'd:** August 7, 2025

**100 Days Ends:** November 15, 2025 (30-Day Extension: December 15, 2025)

**Conclusions:** *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) ..... Documented
- Detailed Description..... 19 CSR 60-50.430(4) ..... Documented
- Community Need ..... 19 CSR 60-50.440(3) ..... Documented

**APPLICATION SUMMARY:**

*The application summary was **complete**.*

**PROPOSAL DESCRIPTION:**

*The detailed project description was **complete**.*

The applicant proposes to **replace a linear accelerator**. A Certificate of Need (#4877 HT) was issued in May of 2013 for the current unit. The existing unit is a Varian TrueBeam STx and the replacement would be a Varian TrueBeam with HDMLC. The applicant expects renovations to be complete by end of October of 2025 and installation of the new unit November of 2025. The existing unit will be traded in upon installation.

**COMMUNITY NEED CRITERIA AND STANDARDS:**

*Compliance with the Criteria and Standards for “equipment” was **documented**.*

The current unit is over twelve years old and fully depreciated. According to the vendor, Varian Medical Systems, 10-12 years is the useful life. The applicant provided a copy of the vendors EOS/EOL letter.

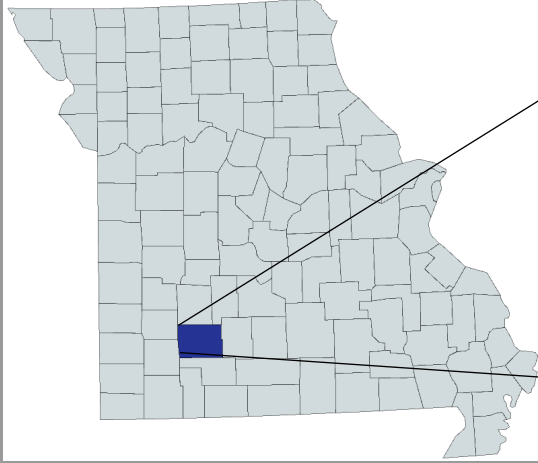
The replacement unit will offer flexible, powerful, and accurate EBRT, IMRT, IGRT and stereotactic treatments to patients and the providers. Additionally, the replacement unit can offer the following advances: body mapping, advanced radiation care using Hounsfield Unity, improved imaging, higher dose rates, reduced motion-related artifacts and increases the ability to precisely target the tumor. The unit also features a larger Field of View which allows clinicians to see anatomical changes more clearly with improved visualization of the patient treatment volumes and surrounding organs at risk.

The applicant expects utilization to increase with the replacement equipment and states there would be no direct increase in patient charges.

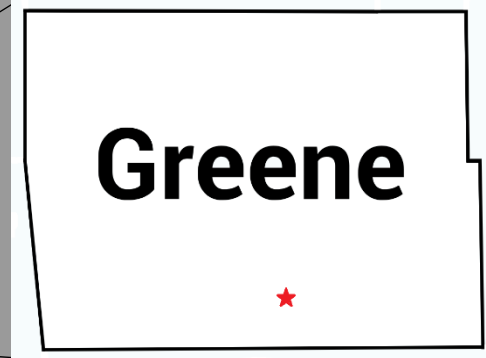
**ADDITIONAL INFORMATION:**

*A small amount of additional information was required from the applicant and is posted on the Certificate of Need website.*

## Replacement CT



Location in Missouri



View of Service Area

**Applicant:** Lester E. Cox Medical Centers (owner/operator)

**Contact Person:** John Chastain, 417-269-3108  
*John.chastain@coxhealth.com*

**Project Address:** 3801 S National Avenue  
Springfield, 65087 (Greene County)

**Cost:** \$2,208,924

**Appl. Rec'd:** August 7, 2025  
**100 Days Ends:** November 15, 2025 (30-Day Extension: December 15, 2025)

**Conclusions:** *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) ..... Documented
- Detailed Description.....19 CSR 60-50.430(4) ..... Documented
- Community Need.....19 CSR 60-50.440(3) ..... Documented
- Financial Feasibility.....19 CSR 60-50.470(2-4) ..... Documented

# #6202 HT: CoxHealth

## APPLICATION SUMMARY:

*The application summary was **complete**.*

## PROPOSAL DESCRIPTION:

*The detailed project description was **complete**.*

The applicant proposes to **replace a CT scanner** previously purchased under the threshold. The existing scanner is a GE Lightspeed Pro 16. The replacement equipment would be a GE Revolution APEX 4.0. The project includes the equipment with some renovations needed. The applicant expects renovations to commence in November of 2025 and installation of the new unit during December of 2025. The existing unit will be decommissioned upon installation.

## COMMUNITY NEED CRITERIA AND STANDARDS:

*The applicant **documented** compliance with the Criteria and Standards for “equipment.”*

According to the applicant, the current unit is 10 years old and has had at least 4 service calls within the last 12 months. The unit reached end of support service status on 2/28/2021.

The replacement equipment offers cardiac scanning, increased quality, has a significant reduction in radiation dose, and offers imaging at faster speeds (16 slices currently per rotation to 256 slices) than the current unit. Technological advances of the replacement are within the Detector and Slice equipment. Patient satisfaction would be improved by offering quicker diagnosis, treatment planning, better outcomes, and an overall better experience. The applicant intends to use this unit for procedures such as biopsies and drain placements. With increased contrast resolution it will enhance needle visibility and the surrounding tissues which will improve target accuracy.

The applicant anticipates the new scanner to increase scan through. Overall patient charges would not be affected by the replacement equipment.

## FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

*The applicant **documented** financial feasibility of the project.*

The project would be financed with unrestricted funds. A letter from Commerce Trust was submitted documenting the applicant has sufficient funds for the project.

## ADDITIONAL INFORMATION:

*Additional information was required from the applicant. It is included with the electronic copy of the application on the CON website.*