



2026 Iowa Certificate of Need (CON) Application

Instructions: 1. Complete all the sections below. 2. Provide concise, evidence-based responses, with supporting documentation or data as needed. 3. Reference Iowa Code 10A.714, as needed, to complete the application. 4. Upload additional documentation, as needed.

Primary Contact

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Primary Contact Employer

Wayne County Hospital

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Facility Name

Wayne County Hospital

Facility Address

P O Box 305, 417 S East Street, Corydon, Iowa 50060

Project Title

Wayne County Hospital -Linear Accelerator - Healthy Hometowns

Project Type

New Equipment

Would you like to request a summary review?

Yes

1. Applicant and Facility Overview

a. Project Purpose and Objectives:

The objective of this project is to provide radiation therapy to patients at Wayne county Hospital. WCH has received a grant for a linear accelerator through the Healthy Hometowns Best and Brightest Equipment Grant. Wayne County will build an addition to house the linear accelerator vault and required service area, i.e. changing rooms and exam rooms as well as a hot lab. Our patients currently travel 75 miles each way to receive this cancer treatment. Wayne County and surrounding Counties have an aged and low-income population which makes travel difficult to receive needed treatment.

b. Relationship to Long-Range Development Plan:

WCH has long-term goals for sustainability, growth, and evolution of this project. WCH will fully integrate ongoing maintenance, licensing, and services costs into our ongoing mission, vision, and budgets for the future. Further, through the comprehensive project assessment and planning process during the application development phase, WCH gave considerable weight to equipment and systems that are interoperable with existing systems and have proven long lifecycles and scalability.

Furthermore, except for the equipment purchases funded by the grant, all other costs of implementing and

maintaining the project will be incorporated into WCH's operational budgets moving forward. WCH will not be reimbursed for the staff and coordination time and effort to purchase and install the equipment, to schedule patient visits, provider treatment and diagnoses, other unaccounted for staff time and effort, etc. These are all hard costs and opportunity costs that WCH will absorb to ensure their communities are appropriately served. More specifically, in carrying out this project, WCH anticipates absorbing the following expenses into the operating budget moving forward:

- Equipment – depreciation of equipment, replacement equipment, and miscellaneous unbudgeted needs
- Labor – WCH will also provide for labor costs to most effectively and efficiently provide critically needed care services, to reduce admissions & readmissions, and to help patients manage their conditions and prescriptions away from the system. This is in addition to various administrative and technical costs incurred to install and maintain equipment at the various sites and to coordinate with and provide care to patients.
- Facilities – in addition to the previously noted facilities/equipment expenditures, additional investments at WCH will come both in the near- and long-terms to (1) get the services up and running, (2) make improvements for increased traffic as programs & services develop and evolve, and (3) grow the service lines by adding other care services and/or establishing referral partners.

c. Description of Proposed Service/Program:

Addition of New Linear Accelerator. This project is included in the Healthy Hometowns Grant.

d. Target Population: Specify geographic and demographic areas.

The direct population of this service will be Wayne County and Surrounding Counties including Decatur County, Clarke County, Lucas County, Monroe County and Appanoose County. We expect that the limited number of linear accelerators in the state will expand our catchment area to at least 75 miles in any direction from Corydon, Iowa.

The ability to have a linear accelerator will allow for the aged and low-income population of Wayne County and surrounding counties to be able to afford to receive the needed cancer treatment for their diagnosis, rather than have to take time off work to drive 75 miles each way to a facility that has a linear accelerator.

e. Relation to Existing Provider Network: Summarize relationship with other health care providers/services in the region.

While being an independent Critical Access Hospital in South Central Iowa, Wayne County Hospital has extensive networks with surrounding hospitals. Wayne County Hospital contracts Mission Cancer and Blood to provide Oncology outreach services to our patients through the University of Iowa. Wayne County Hospital has a Critical Access Agreement with the University of Iowa.

f. Funding Sources and Financial Resources: Identify and document sources of funding and financial viability.

Wayne County Hospital will use the Healthy Hometowns Equipment Grant to Finance most of the Linear Accelerator. We will use funds from operations, other grants and loans to fund the building of the Linear Accelerator Vault.

Current # of Beds (if changing)

Current bed type (if changing)

Requested # of Beds (if changing)

Requested bed type (if changing)

Document Upload

2. Community Need and Service Gaps

a. Description of Need:

Linear Accelerators (“LINACs”) are state-of-the-art devices that have revolutionized cancer treatment by enabling external beam radiation treatments, speeding up electrons to deliver therapeutic X-rays or electrons to patients’ tumor(s). Such treatment through a LINAC is highly effective at both destroying the cancerous cells and at sparing nearby surrounding normal tissue. The radiation beams are precisely shaped and directed to target the tumor destroying cancer cells, ensuring accurate targeting, and allowing for customized treatment plans based on the specific needs of each patient and for real-time adjustments to be made during treatment. Such highly precise radiation delivery minimizes damage to surrounding healthy tissues and greatly reduces and mitigates side effects. LINACs can be used to treat all body sites using conventional techniques as well as more sophisticated techniques, like intensity modulated radiation therapy (IMRT), volumetric modulated arc therapy (VMAT), image guided radiation therapy (IGRT), stereotactic radiosurgery (SRS), and stereotactic body radiation therapy (SBRT).

A LINAC, which WCH currently lacks, is essential for effectively treating this life-threatening condition, better enabling providers to take proactive treatment steps, reduce radiation exposure to healthy tissue, and tailor treatments and treatment plans to optimize patient health outcomes.

Most notably, specific to this project, data around cancer incidence, diagnoses, stage at diagnoses, treatment, mortality, survivorship, and more are all substantially worse in the region than the rest of the state. For example, the age-adjusted cancer incidence rate (all cancers) in Appanoose County from 2017-2021 was 551.7 cases per 100,000 people, which is roughly 60 cases per 100k people more than the state average (491.8) and the national rate (444.4). Monroe County (540.9 cases per 100k), Decatur County (533.4), Clarke County (472.62), Wayne County (470.69), and Lucas County (454.66) have similarly greater rates of cancer in comparison to so many other areas in the U.S. and in IA.

b. Assessment of Existing Services and Gaps:

Currently, the closest LINAC's to WCH are located 65 miles away (one-way) in Ottumwa, over 70 miles away (one-way) in Des Moines, 75 miles one-way in Creston, and over 86 miles away in West Des Moines, with wait times often delaying vital treatment for multiple months. The lack of accessibility of such life-saving equipment, compounded by regional socioeconomic barriers and challenges that inhibit transportation, in addition to such lengthy delays are substantially detrimental to the health and lives of the roughly 53,000 people that call the area home. Therefore, in sum, the requested service represents a crucial one-time investment that will meaningfully enhance the healthcare system and, more importantly, transform and save the lives of so many in south central Iowa.

c. Alternatives Analysis:

The alternative to adding a linear accelerator is to continue our current practice of having patients drive 75 miles one-way to obtain needed services.

d. Accessibility Considerations:

WCH serves a rural, predominantly low-income area that has historically had some of the worst health outcomes in both Iowa and the nation as a whole.

As you know, rural residents face serious challenges in accessing care—including transportation, cost, trust, and availability—leading to delays in treatment, poorer health outcomes, and higher mortality. Access to care is essential for physical, mental, and social well-being, yet many patients, especially older adults, people with disabilities, and low-income individuals, struggle with transportation over long distances to receive necessary services like precise radiation cancer treatment enabled by a linear accelerator.

A notable 2022 report highlighted that rural residents face longer, more expensive, and riskier travel to care due to hospital closures and limited public transport. This contributes to missed appointments, disrupted treatments, and worse outcomes—especially for patients with chronic illness. Additional factors such as low income, limited health literacy, poor infrastructure, and fewer local resources exacerbate these

issues.

These barriers to care and socioeconomic challenges are sadly all too familiar to the highly rural communities that WCH serves. Despite WCH tremendous successes to date serving many socioeconomically disadvantaged rural patients in the areas served and WCH being one of the largest employers in the region, the area economy still significantly lags behind the rest of the state and nation. There are notable disparities in median income levels, poverty levels, percent of children in poverty, reliance on public assistance, etc.

By enabling timely local diagnoses and treatments, the project will reduce the burden on Iowa's strained healthcare system, particularly for low-income or uninsured patients. Poor health outcomes lower reimbursement rates and increase costs, creating a cycle that harms both providers and patients across Iowa.

e. Community Input/Support:

Please see attached letters of support.

Document Upload (if needed)

WCH Letter of Support - J. Moley.pdf

N. McCart.pdf

WCH Letter of Support - L. Horton.pdf

WCH Letter of Support - L. Moore.pdf

WCH Letter of Support- Brenda.pdf

WCH Letter of Support D. Jones.pdf

WCH Letter of Support- K. Summers.pdf

f. Non-discriminatory Access:

Linear accelerators (LINACs) are offered to patients without discrimination through standardized clinical protocols, regulatory oversight, and integrated care models that treat both allopathic (MD) and osteopathic (DO) practitioners as qualified referring physicians. Ensuring equal access involves adhering to established "standard of care" guidelines for cancer treatment regardless of the provider's background or the patient's insurance type.

3. Impact on Existing Providers

a. Impact Assessment:

The installation of a linear accelerator (LINAC) significantly impacts family physicians by providing faster, more precise treatment options (e.g., SBRT, VMAT) that can reduce treatment times from weeks to days. While this enhances care quality. The addition a LINAC eliminates the need for patients to travel to other facilities.

b. Community and Economic Impact: Broader system effect and value-added to the community.

Linear accelerators (LINACs) significantly impact communities by enabling high-precision, rapid cancer treatments, allowing patients to receive care locally. Economically, they drive high-tech jobs, stimulate specialized manufacturing, and support industrial applications like sterilization, while requiring substantial capital investment and specialized staffing, acting as a regional healthcare anchor.

c. Efficiency in Use of Resources: Shared/cooperative arrangements to maximize efficiency.

Linear accelerators (LINACs) are becoming increasingly precise and efficient, transforming radiation therapy by reducing treatment times to minutes, which allows for higher patient throughput and the

potential for increased community-based access. This shift significantly impacts family physicians (FPs), who play a crucial role in patient support, symptom management, and coordinating care during and after radiation treatment. Shared or cooperative care arrangements between radiation oncologists and family physicians are essential to optimize this technology, as they improve care continuity, reduce the burden on specialists, and better manage the growing number of cancer survivors.

4. Financial and Operational Feasibility

a. Financial Projections and Feasibility:

Purchase of the Linear Accelerator is funded through Healthy Hometowns Best and Brightest Equipment Grant. WCH will build a vault and necessary rooms to provide the services to patients. There will be start up costs in Year 1, which is normal for services. Year 2 and Year 3 show positive projections. See Radiation Oncology Budget.

Document Upload (3-year budget projections)

Radiation Oncology Budget 3 Year.pdf

b. Staffing and Operations:

Wayne County Hospital (WCH) will deploy a scalable, multidisciplinary staffing plan to operate the LINAC at 10-20 daily treatments, accommodating projected 120 patients/year, including 20-40 non-local overflow patients from regional bypass and wait times at facilities between 44-80 miles away.

During installation (first 3-6 months post-funding), oversight will be provided by WCH's Chief Medical Officer, contracted Radiation Oncology Consultant, and relevant IT and facilities staff. Following installation, ongoing maintenance of the LINAC will be led and provided by WCH's in-house technician with any additional as-needed support provided through the vendor contract. Operationally, the new LINAC will be utilized for direct patient treatment and care services by WCH's ABR-certified Radiation Oncologist; two ARRT-certified Radiation Therapists; contracted Dosimetrist and Medical Physicist for quality assurance purposes; and integrated Oncology Nurse. WCH confirms that all such medical professionals on staff who will be utilizing the LINAC will have the appropriate credentials and skillset to use the equipment.

Altogether, such a thorough staffing model ensures the greatest capacity for timely and highquality care that greatly reduces regional delays, meaningfully improves patient and community health outcomes, and also enhances provider retention.

c. Short and Long-term Viability:

WCH has long-term goals for sustainability, growth, and evolution of this project. WCH will fully integrate ongoing maintenance, licensing, and services costs into our ongoing mission, vision, and budgets for the future. Further, through the comprehensive project assessment and planning process during the application development phase, WCH gave considerable weight to equipment and systems that are interoperable with existing systems and have proven long lifecycles and scalability.

5. Community and Economic Impact

a. Community Engagement:

A linear accelerator (LINAC) project, such as the installation of new radiation therapy equipment or the development of a cancer center, significantly impacts community engagement by acting as a catalyst for local healthcare improvement, creating a focal point for public outreach, and providing opportunities to address health disparities. Such projects foster, or in many cases necessitate, collaboration between health systems and the local population to ensure the technology meets specific, unmet needs close to home.

b. Resource Availability:

Resources needed, including but not limited to Radiation Therapists, Medical Dosimetrist, Medical Physicist, and Radiation Oncologist will be recruited and can be contracted to fill a gap during recruitment.

c. Organizational Relationships:

Wayne County Hospital has a Critical Access Hospital agreement with University of Iowa Hospital and Clinics. WCH contracts Mission Cancer and Blood (owned by University of Iowa Hospital and Clinics) for Oncologists to provide services at WCH. WCH contracts with other specialty groups for Physicians to provide services, including but not limited to Orthopedics, Rheumatology, Gynecology, General Surgery, ENT, Dermatology, Ophthalmology (cataract surgery) and Audiology.

While no longer a member of the MercyOne Health Network, WCH has strong relationships with local hospitals and hospitals from that network.

WCH has an agreement with Southwestern Community College (SWICC) for nursing students to receive clinical experience.

6. Project Planning

a. Project Timeline:

Our quick timeline is to have a Linear Accelerator operational by December 31, 2026.

b. Innovative Components:

Adding a linear accelerator (LINAC) adds significant value by increasing patient throughput, enabling advanced, precise treatments like SBRT/SRS (stereotactic body radiotherapy/radiosurgery), and enhancing operational reliability. Key value-added aspects include faster treatment times, improved imaging for tumor targeting (IGRT), better sparing of healthy tissue, and increased competitive advantage for the clinical facility.

c. Regulatory Compliance:

Regulatory compliance for a medical linear accelerator (LINAC) involves strict adherence to radiation safety, electrical standards, and quality management protocols. Key requirements include facility shielding surveys, acceptance testing, daily/monthly QA checks, and personnel training.

7. Special Criteria for Specific Services:

a. Alternative Consideration (10A.714(2)(a)):

Wayne County Hospital plans to form alliances with hospitals in surrounding areas to be able to provide radiation oncology to their patients to ensure that patients will not have to travel as far as they do currently. These facilities will be able to keep their diagnostic and follow-up care as capacity allows. We anticipate having more oncologist presence at Wayne County Hospital to provide more follow-up care to patients.

b. Utilization of Similar Facilities (10A.714(2)(b)):

Surrounding facilities do not have similar capabilities of providing radiation therapy within a 75 mile radius.

c. Construction/Modernization (10A.714(2)(c)):

Construction will be necessary for modernization to provide a vault for the linear accelerator as well as necessary areas for a hot lab, changing room, exam room, and injection rooms. It is the intent of WCH to retrofit current space, adjacent to the linear vault, to expand cancer care, including chemotherapy and additional infusion space.

d. Access Concerns (10A.714(2)(d)):

With the addition of the linear accelerator (LINAC), our patients will be able receive necessary life-saving treatments without traveling 75 miles one way to receive the same services that WCH will be able to

provide.

e. UIHC Special Role (10A.714(3)):

Wayne County Hospital has a Critical Access Hospital agreement with University of Iowa Hospital and Clinics. WCH contracts Mission Cancer and Blood (owned by University of Iowa Hospital and Clinics) for Oncologists to provide services at WCH. With this team-based approach, our patients will receive high-quality care close to home.

Signature

Denise Hook, CFO

Additional Supporting Documents Upload