February 26, 2026

ChristianaCare Positron Emission Tomography and Computed Tomography (PET/CT) Scanners

Certificate of Public Review
Delaware Health Resources Board Proposal

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About ChristianaCare

ChristianaCare is a nonprofit academic health system, serving Delaware, Maryland, Pennsylvania and New Jersey. We are Delaware's largest private employer and a Top 10 Philadelphia area employer.

Nearly **15,000** Employees

Community Benefit Spending **$232M**

Excellent Care

- Delaware Ranked No. **1** in the U.S. for Hospital Quality (US News & World Report)
- **#1** Delaware Hospital (US News & World Report)
- Top Hospital – Money Magazine
- Magnet Recognized
- Beacon Award Excellence
- Joint Commission National Quality Approval

Acute Care

- Three hospitals and a freestanding emergency department.
- Level I trauma center.
- Level III neonatal intensive care unit.
- Comprehensive stroke center.
- Regional centers of excellence: cancer care, heart & vascular care, neurosciences, and women's and children's health.

Research & Innovation

- Gene Editing Institute harnesses CRISPR to drive groundbreaking cancer therapies.
- **35%** of cancer patients join research clinical trials, **7** times the national average.
- TigerConnect links EMS and clinicians in real time, speeding life saving heart and stroke care.
- Hospital Care at Home program delivers acute-level treatment at home, reducing readmissions.

Caring for our Neighbors Fiscal Year 2025

- **Hospital Admissions: 63,239**
- **Outpatient Visits: 871,156**
- **Primary Care Office Visits: 330,335**
- **Virtual Visits: 126,238**
- **Emergency Department Visits: 234,783**
- **Urgent Care Center Visits: 308,984**

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ChristianaCare Nuclear Medicine & PET/CT Department

- Nuclear medicine uses small amounts of radioactive materials to reveal how organs work and to help diagnose and treat a wide range of diseases.
- ChristianaCare's PET/CT team delivers safe, high-quality care backed by more than 20 years of IAC accreditation, a national marker of excellence.
- PET/CT blends PET and CT imaging to give a complete picture of disease, supporting earlier, more accurate diagnosis of cancer, neurological conditions and heart disease.



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Our Proposal

Introduce two new Siemens Biograph Trinion PET/CT scanners to the Delaware community:

1. **Wilmington Hospital** – inpatient and outpatient access.
2. **Helen F. Graham Cancer Center & Research Institute** – outpatient access.

Increasing access to PET/CT can improve patient quality of life by:

- Facilitating earlier diagnosis.
- Providing more personalized treatment planning.
- Reducing other unnecessary procedures and testing.



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Increasing Need for PET/CT Imaging

- Outpatient volumes for cancer, neurology and cardiology services are forecasted to increase substantially across the state over the next six years, which will continue to increase demand for PET/CT services.*
- The **65+** population in DE is expected to grow by nearly **20%** over the next **10** years.*
- A new group of medicines that can both find and treat disease will drive further demand by enabling additional cutting-edge diagnostic and therapeutic options.
- Without increasing access, patients will experience longer wait times, resulting in delayed diagnosis and treatment and potentially worse health outcomes.



* Source: Sg2 Analytics

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PET/CT: Current State

- ChristianaCare operates 2 PET/CT units, both in Newark:
  - Helen F. Graham Cancer Center & Research Institute.
  - Christiana Hospital.
- The number of our PET/CT scanners has been the same since 2008.
- **3,600+** procedures performed between July 2024 and June 2025.
- Increasing patient demand has led to an outpatient backlog of **75+** patients with an average wait time of **1-2** weeks.
- Inpatients at Wilmington Hospital have to be transported by ambulance to Christiana Hospital in Newark for their scans.
- Limited capacity can delay treatment and diagnosis for patients.
- We are currently supplementing with a mobile PET/CT unit at the Graham Cancer Center to ensure patients have timely access.



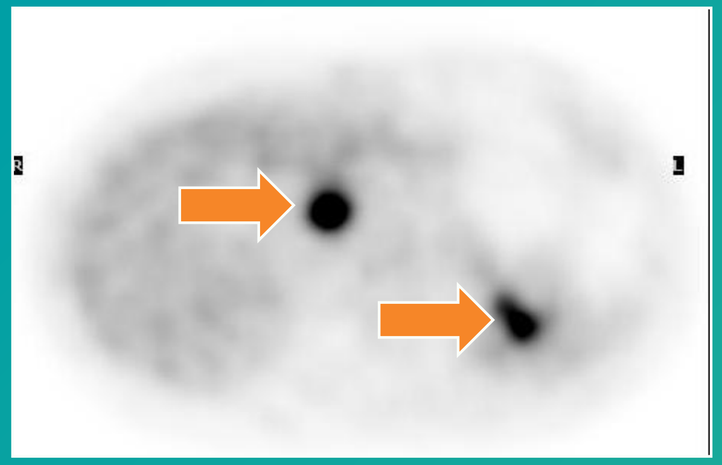
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What PET/CT Shows



PET

"What is going on."





CT

"Where things are."



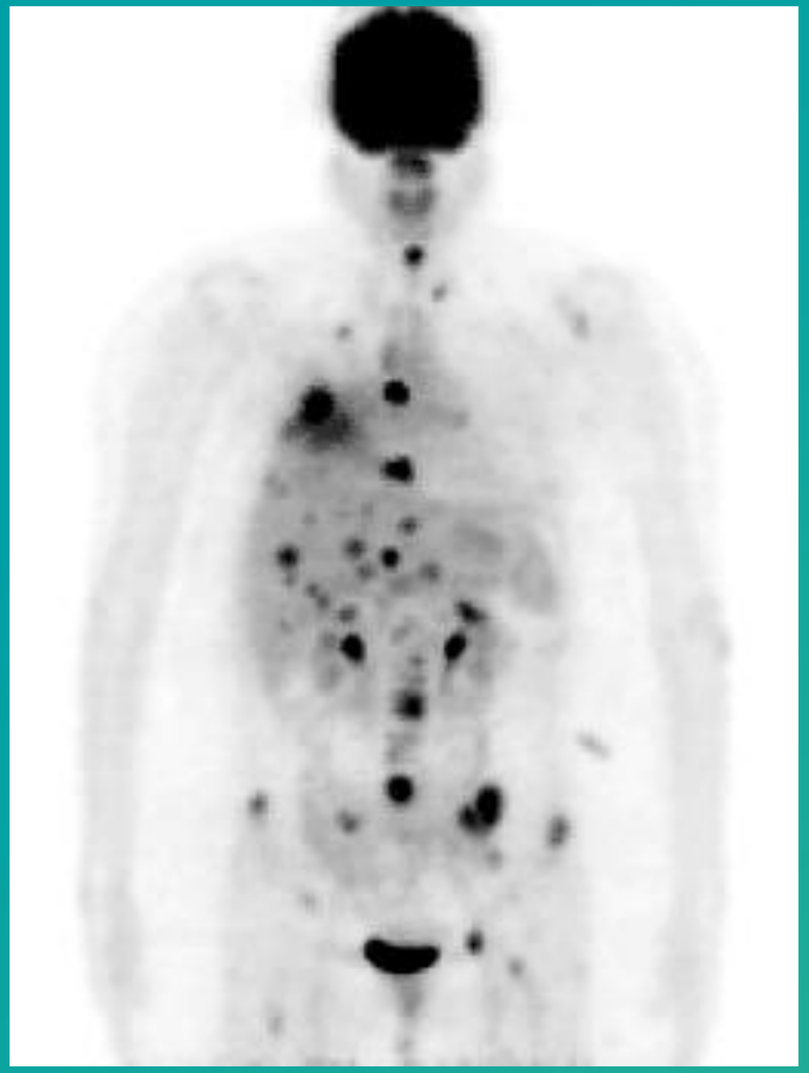


PET/CT

"What is going on and where."



Breast Cancer Example Using PET/CT



Breast Cancer



After Chemotherapy

Benefits of Siemens Biograph Trinion PET/CT

- State-of-the-art technology.
- Exceptional imaging performance.
- Enhanced comfort and better patient experience.
- Energy efficiency and compact footprint.
- Scalable and future-ready.

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Expanding PET/CT Services: Improving Access and Outcomes for Delawareans

Better Health Outcomes & Patient Experience

- Earlier and more accurate diagnostic capabilities.
- Reduces unnecessary tests, procedures and exploratory surgeries.
- Supports earlier disease detection, lower health care costs.

Personalized Care

- Highly tailored interventions to reduce disease progression.
- Individualized treatment planning for better outcomes.

Improved Access

- Shorter wait times for both inpatient and outpatient scans.
- Ability to perform inpatient scans at Wilmington Hospital.
- Increased access points for community providers to guide patients to the care they need.

Additional Benefits

- Physician Engagement: Enhances collaboration with community providers.
- Approved Service: FDA-approved equipment, covered by CMS.
- Cost Efficiency: Lower overall costs through early detection and reduced need for costly procedures.

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Effect on Health Care Costs and Charges

- Charges for PET/CT services will remain unchanged.
- Patient Financial Assistance Policy is available to all patients who require a PET/CT scan and meet eligibility criteria.
- Making PET/CT more widely available will improve population health, especially for elderly and low-income individuals who often face challenges accessing care.
- This technology will enable physicians in Delaware and throughout the region to refer patients to ChristianaCare for PET/CT services.

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New PET/CT Scanners Double Capacity

Two new PET/CT scanners will allow ChristianaCare to give **more patients faster access** to advanced imaging.

	Year 1	Year 2	Year 3
Helen F. Graham Cancer Center & Research Institute	1,857	1,875	1,894
Wilmington Hospital	1,771	1,788	1,806
Total	**3,628**	**3,663**	**3,700**

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Expected Costs/Savings

- **Capital investment of $8M** to be funded through cash reserves.
  - Two Siemens Biograph Trinion PET/CT scanners.
  - Minor renovations to Wilmington Hospital 2nd floor and Helen F. Graham Cancer Center & Research Institute 1st floor.
- The scanners will be financially self-sustaining.
- Health care cost savings due to earlier disease detection and reduction of higher-cost interventions have not been quantified but are anticipated.
- We expect to need 8 new full-time employees (FTE).

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Timeline for Two New Scanners

Pending approval of Certificate of Public Review application

Key Milestones *(Both Locations Follow the Same Schedule)*	
Finalize construction plan and purchase equipment	**Spring 2026**
Start construction and recruit staff	**Late Spring 2026**
Staff training	**Early Summer 2026**
Install equipment and begin scheduling patients	**Late Summer 2026**
First patient scan	**Fall 2026**

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Thank You.

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Appendix

16 Del. Code §9306 – Review Considerations

Summary

(1) The relationship of the proposal to the Health Resources Management Plan

1. *Narrative and rationale for the proposed project is sound.*
2. *Relevant certifications and accreditation status are in good standing.*
3. *Letters in support of the proposal, as well as administrative, clinical and leadership positions have been provided.*

- *Signed participation agreement with DHIN, and is submitting records / accessing data from DHIN for care coordination purposes.*
- *Appropriate balance in consideration of access, cost, and quality of care issues are seriously embraced in the application.*
- *the proposal supports access and continuity of care, chronic disease management, use of health information technology and affiliation with the Delaware Health Information Network (DHIN), care coordination and other strategies to facilitate Delaware's transition to value-based payment models to improve overall health outcomes.*
- *The proposal, where possible, contributes to the care of the medically indigent.*

Relationship to HRMP
Sound narrative.
Certifications included.
Letters included.
Active with DHIN.
Included.
Supports value-based care.
Indigent services as needed.

(2) The need of the population for the proposed project;

1. *The proposal demonstrates a clear public need for the service(s) proposed, as well as identifying the population to be served, as well as data-oriented evidence.*
2. *The proposal specifies its plan for care of patients without private insurance coverage, as well as its plan for care of medically underserved populations with the proposed service area.*

Population Need
Population need included.
Indigent services as needed.

16 Del. Code §9306 – Review Considerations

Summary (cont.)

(3) The availability of less costly and/or more effective alternatives to the proposal, including alternatives involving the use of resources located outside the State;

1. *The proposal provides information about alternative providers of the proposed service, referencing the specific providers that now offer the proposed service and the impact of those parties, including financial information indicating whether these alternative providers are more or less costly in the provision of the service.*

- *The applicant has taken into account the availability of out-of-state, yet geographically close, health care service resources.*

(4) The relationship of the proposal to the existing health-care delivery system;

1. *The applicant has described in detail how and where the proposed patient population is currently being served. The applicant has described existing referral patterns in the proposed service area and demonstrated that the proposed project shall not result in an unnecessary duplication of existing or approved health care facilities or services.*
2. *To ensure appropriate continuity of care, accessibility, and related quality-enhancing considerations, the applicant has provided information regarding the applicant's established referral arrangements with other providers in the service area. The applicant has described how their past and proposed provision of health services promote a continuum of care in Delaware's health care system.*
3. *The applicant has also demonstrated that the proposed project will not negatively impact employment, the diversity of health care providers or patient choice in the defined service area.*

Alternative Options
Alternate options and providers are discussed.
Out-of-state providers are illustrated.

Existing Heath-Care Delivery System
Population described and opportunities for other provider referrals discussed.
Continuum of care is described in the application.
No negative impacts to employment are expected.

16 Del. Code §9306 – Review Considerations

Summary (cont.)

(5) The immediate and long-term viability of the proposal in terms of the applicant's access to financial, management and other necessary resources;

1. *The application has demonstrated the financial feasibility of the proposed project.*
2. *The applicant has provided proof of all funding or financing sources for the proposal and the dollar amount of each.*

Long-term Viability
The project is financially feasible.
The project is self-funded.

(6) The anticipated effect of the proposal on the costs of and charges for health care; and

1. *The applicant has demonstrated how the proposal will impact the financial strength of the health care system in the state. Specifically, the applicant has demonstrated how the proposed project will improve cost-effectiveness of health care services within the service area.*
2. *The applicant has also demonstrated how the proposal will impact cost and charges to the individual(s) for health services (where applicable).*

Effect on Costs and Health Care Charges
Will facilitate earlier diagnosis and treatment and reduce the need for more costly procedures.
The project will have no aggregate effect on costs for health services.

(7) The anticipated effect of the proposal on the quality of health care.

1. *The applicant has demonstrated how the proposed project will improve quality and accessibility of health care services within the service area, including but not limited to, the provision of or any change in the access to services for Medicaid recipients and indigent persons as well as the impact of providing services to these populations.*

Effect on the Quality of Health Care
Earlier and more accurate disease detection, state-of-the-art imaging performance, reduced wait times for inpatient and outpatient scans

- **Note that there is no increase in beds, footprint, or aggregate overhead capital infrastructure.**
- **Headcount will increase by 8.0 FTEs in Year 1.**