

JACKSONKELLY^{PLLC}

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March 18, 2019

Br. 1

Via Overnight Courier

U.S. Nuclear Regulatory Commission, Region I
2100 Renaissance Blvd., Suite 100
King of Prussia, PA 19406-2713

RE: Transfer of Control Application
Summersville Regional Medical Center
Material License No. 47-31126-01

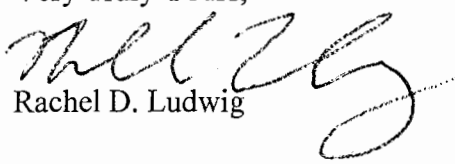
REC RG 103 20 19 AM 09 42

To whom it may concern:

Enclosed with this letter is the Transfer of Control Application submitted on behalf of Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. related to the change of control of Material License No. 47-31126-01. The projected effective date for the transaction further described in this application is July 1, 2019.

If you have any questions or concerns, please contact me at [REDACTED]

Very Truly Yours,


Rachel D. Ludwig

RDL/ncj
Enclosure

611667
REC RG 103 20 19 AM 09 42



400 Fairview Heights Rd. • Summersville, WV 26651 • 304-872-2891 • www.summersvilleregional.org

March 18, 2019

U.S. Nuclear Regulatory Commission, Region I
2100 Renaissance Blvd., Suite 100
King of Prussia, PA 19406-2713

RE: Summersville Regional Medical Center
Material License No. 47-31126-01


To whom it may concern:

The purpose of this letter is to advise you that The West Virginia Health Care Cooperative, Inc. ("WVHCC") intends to assume operations of Summersville Regional Medical Center ("SRMC") from Summersville Regional Medical Center Commission and lease the properties owned by the City of Summersville Building Commission for purposes of operating SRMC (the "Transaction"). West Virginia University Hospitals, Inc. is the sole member of WVHCC. In accordance with 10 C.F.R. §§ 30.34 and 70.36, SRMC and WVHCC jointly request the consent of the Nuclear Regulatory Commission ("NRC") to the change of control of Material License No. 47-31126-01 from SRMC to WVHCC. The projected effective date for the Transaction is July 1, 2019.

Enclosed with this letter is the Information Needed for Transfer of Control Application. Following the Transaction, there will be no changes to the personnel, use or location of the devices, but the licensee will change to WVHCC. WVHCC will abide by all constraints, conditions, requirements, representations and commitments of the current owner.

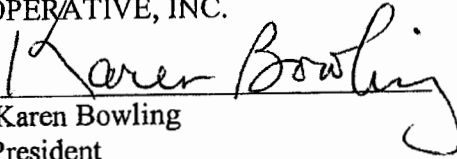
If you have any questions or concerns, please contact SRMC's representative, Karen Bowling, at (304) 872-8402, or WVHCC's counsel, Rachel D. Ludwig, at [REDACTED].

SUMMERSVILLE REGIONAL MEDICAL
CENTER


By: Karen Bowling
Its: President and CEO

March 18, 2019 Correspondence Re: Summersville Regional Medical Center Material License
No. 47-31126-01 acknowledged by:

THE WEST VIRGINIA HEALTH CARE
COOPERATIVE, INC.


By: Karen Bowling
Its: President

SUMMERSVILLE REGIONAL MEDICAL CENTER
License No. 47-31126-01
Information Needed for Transfer of Control Application
to Transfer License to The West Virginia Health Care Cooperative, Inc.

Include a contact name and either U.S. Nuclear Regulatory Commission (NRC) regional office or Headquarters telephone numbers for follow-up information, as required.

NRC Region: Region I
Telephone: 304-373-1528

Contact: Steve Radabaugh
Fax: 304-373-1543

Definitions:

Control: Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and, thus, the direction of the activities under the license.

Transferee: A transferee is an entity that proposes to purchase or otherwise gain control of an NRC-licensed operation.

Transferor: A transferor is an NRC licensee selling or otherwise giving up control of a licensed operation.

Information Needed for Transfer of Control

Licensees must provide full information and obtain NRC's **prior written consent** before transferring control of the license. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Describe any planned changes in the organization, including but not limited to, transfer of stocks or assets and mergers, change in members on Board of Directors, etc. Provide the new licensee name, mailing address, and contact information, including phone numbers. Clearly identify when the amendment request is due to a name change only.

Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. have entered into an Operating Lease and Agreement dated December 31, 2018 (the "Agreement"), whereby the parties agree that The West Virginia Health Care Cooperative, Inc. will assume operations of Summersville Regional Medical Center from Summersville Regional Medical Center Commission and lease the properties owned by the City of Summersville Building Commission for purposes of operating Summersville Regional Medical Center (the "Transaction"). The anticipated effective date of the Transaction is July 1, 2019. Under the terms of the Agreement, Summersville Regional Medical Center is required to obtain approval by the NRC for the change of control in the licensed nuclear material to The West Virginia Health Care Cooperative, Inc.

The name of the transferee is: The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

The licensee will change to The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

The mailing address and contact information for the transferee will remain the same and is:

**James Michael Helvey, CNMT
400 Fairview Heights Road, Summersville, West Virginia 26651
Phone Number: 304-872-8439
Fax Number: 304-872-8584
mhelvey@srmcwv.org**

See attached pre- and post-transaction organizational charts showing the corporate structure of the license holder.

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel and any changes in the training program.

No changes to personnel. The Radiation Safety Officer for the activities authorized by this license will remain the same—James Michael Helvey, CNMT. Mr. Helvey's certificate is attached.

3. Describe any changes in the location, facilities, equipment, radiation safety program, use, possession, waste management, or other procedures that relate to the licensed program.

There will be no changes in location, facilities, equipment, or procedures that relate to the licensed program. The only change is the name of the licensee—The West Virginia Health Care Cooperative, Inc. d/b/a Summersville Regional Medical Center.

4. Describe the status of the licensee's facilities, equipment, and radiation safety program, including any known contamination and whether decontamination will occur prior to transfer. Include the status of calibrations, leak tests, area surveys, wipe tests, training, quality control, and related records.

All required surveillance has been performed, documented, and reviewed. See attached NRC's Safety Inspection Report and Compliance Inspection dated January 23, 2018 and Physicist's Report – Nuclear Medicine by National Physics Consultants, Ltd. dated February 14, 2019.

5. If current decommissioning funding plans (DFP) will be changed as a result of the transfer, the revised DFP should be submitted. If other financial assurance documents will be changed as a result of the transfer, confirm that all financial assurance instruments associated with the license will be held in the transferee's name before the license is transferred, and as required by 10 CFR 30.35(f), the licensee must, within 30 days, submit financial instruments reflecting such changes.

Not applicable.

6. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include

documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Not applicable.

7. Confirm that both transferor and transferee agree to transferring control of the licensed material and activity, and the conditions of transfer, and that the transferee has been made aware of any open inspection items and its responsibility for possible resulting enforcement actions.

Summersville Regional Medical Center and The West Virginia Health Care Cooperative, Inc. agree to transferring control of the licensed material and activity, and the conditions of transfer. Summersville Regional Medical Center has made The West Virginia Health Care Cooperative, Inc. aware of any open inspection items and its responsibility for possible resulting enforcement actions.

8. Confirm that the transferee will abide by all constraints, conditions, requirements, representations, and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

The West Virginia Health Care Cooperative, Inc. will abide by all constraints, conditions, requirements, representations and commitments of Summersville Regional Medical Center.

9. The transferee, in the case of fuel cycle facilities, shall provide documentation showing that it is financially qualified to conduct normal operations. The information can be in the form of income statements and balance sheet forecasts.

Not applicable.

NRC FORM 591M PART 1
(07-2012)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
Summersville Regional Medical Center
400 Fairview Heights Road
Summersville, West Virginia 26651

2. NRC/REGIONAL OFFICE

U.S. Nuclear Regulatory Commission
Region I, 2100 Renaissance Blvd, Suite 100
King of Prussia, Pennsylvania 19406-2713

REPORT NUMBER(S) 2018001

3. DOCKET NUMBER(S)
030-371314. LICENSE NUMBER(S)
47-31126-015. DATE(S) OF INSPECTION
1/23/18

LICENSEE:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the Inspector. The inspection findings are as follows:

- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the Inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

Non-cited violation(s) were discussed involving the following requirement(s) and corrective action(s):

- ☐ 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)

Statement of Corrective Actions

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

Title	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE	TIM HOWARD	Tim Howard	1/24/18
NRC INSPECTOR	Robin Elliott	Robin Elliott	1/23/18
BRANCH CHIEF			

SUNSI Review Completed By: /RA/ RElliott



Public



Non-Sensitive