

Application Details

Application Status	Approved
Application Id	BLA-0000003624
DBA Name of Facility/Agency	Lake Ridge Ambulatory Surgery Center
Facility Type	Outpatient Surgical Hospital
Application Type	Renewal License
Approved Date	10/9/2024
Effective Date	1/1/2025
Expiration Date	12/31/2025

Confirm changes to your facility/agency

Changes to your facility/agency :

- Has the facility DBA or legal name changed?
- Has the facility operator or owner changed?
- Has the facility address changed?
- Has the number of operating rooms or procedure rooms changed?
- Have you changed or added new programs or services?

- None of these changes apply

Facility/Agency Details

Application Type	Renewal License	License Effective Date	1/1/2025
Legal Name of Facility/Agency	Lake Ridge Ambulatory Surgery Center, LLC		
Fictitious Name ("doing business as" or "DBA") of Facility/Agency	Lake Ridge Ambulatory Surgery Center		
Facility/Agency Physical Address	12825 Minnieville Road, Suite 204		
Street	12825 Minnieville Road, Suite 204		
City/Town	Woodbridge	County/Independent City	Prince William County
State	Virginia	Zip Code	22192
Telephone Number	7033579568	Fax Number	7033579575

Mailing Address

Mailing Address	12825 Minnieville Road, Suite 204		
Street	Minnieville Road		
City/Town	Woodbridge	County/Independent City	Prince William County
State	Virginia	Zip Code	22192

Facility/Agency Email Address : jdmacmil@sentara.com

Federal Employer Identification Number (FEIN) : 45-5347932

Current License Number : OSH-0000720

Administrator of Record(If different than Owner/Operator)

Full Name : Julie Billingsley

Title : Administrator

Telephone Number : 7035230994

Email Address : jdmacmil@sentara.com

Ownership Information

Legal Name of Owner : Lake Ridge Ambulatory Surgery Center, LLC

Physical Address : 12825 Minnieville Rd
Street : Minnieville Rd
City/Town : Woodbridge
County/Independent City : Prince William County
State : VA
Zip Code : 22192

Mailing Address : 12825 Minnieville Rd
Street : Minnieville Rd
City/Town : Woodbridge
County/Independent City : Prince William County
State : VA
Zip Code : 22192

Email Address : janette.beltran@lakeridgesurgerycenter.com
Telephone Number : 7033579568
Fax Number :

Federal Employer Identification Number (FEIN) : 45-5347932

Chief Executive Officer

Full Name : Richard Layfield
Email Address : ricklayfield@gmail.com

Chief Financial Officer

Full Name : Madeline Cherry
Email Address : mbcherr1@sentara.com

Additional Ownership Information

Names of any individual or entities having a financial interest of 5% or more

Full Name	Ownership Percentage (%)
Potomac Hospital Corp of Prince WilliamD/BA Sentar	58.82%

Sum of Ownership Percentage (%) : 58.82%

Types of Ownerships & Control : For Profit

For Profit : Limited Liability Company

Not-for-Profit :

Public :

Other(Specify) :

Operator Information

Legal Name of Operator : Lake Ridge Ambulatory Surgery Center, LLC

Physical Address : 12825 Minnieville Rd
Street : Minnieville Rd
City/Town : Woodbridge
County/Independent City : Prince William County
State : VA
Zip Code : 22192

Mailing Address : 12825 Minnieville Road, Suite 204
Street : Minnieville Rd
City/Town : Woodbridge
County/Independent City : Prince William County
State : VA
Zip Code : 22192

Phone Number : 7033579568
Email Address : jdmacmil@sentara.com

Federal Employer Identification Number (FEIN) : 45-5347932

Outpatient Surgical - Hospital Information

Ambulance services providing emergency transportation of patients : Medical Transport, LLC

Inpatient hospitals for transferring patients needing treatment beyond the scope of the applicant : Sentara Northern Virginia Medical Campus

Certification : Medicare;Medicaid

Medicare Provider Number : 49-C0001059

Medicaid Provider Number : 49-C0001059

Accreditation : Yes

Accrediting Organization(s) : AAAHC

Outpatient Surgical - Services Offered

Ancillary Services

Laboratory

Pathology Onsite

Radiology

CT MRI X-Ray Ultrasound

Sexual Assault Treatment Services

Provision of this service on or after July 1, 2023 must be in accordance with a plan approved by the Virginia Department of Health. Hospitals wishing to transition from sexual assault treatment services to sexual assault transfer services (or vice versa) for either adult or pediatric populations must submit a midterm change application.

Adult Pediatric

Sexual Assault Transfer Services

Provision of this service on or after July 1, 2023 must be in accordance with a plan approved by the Virginia Department of Health. Hospitals wishing to transition from sexual assault treatment services to sexual assault transfer services (or vice versa) for either adult or pediatric populations must submit a midterm change application.

Adult Pediatric

Surgical Services

Plastic and Reconstructive ENT Cardiology Therapeutic Radiology Endoscopy
 Urology Ophthalmology Neurology Vascular Access Orthopedic General
Surgery

Outpatient Surgical - Operating Rooms

Total number of operating rooms : 1

Outpatient Surgical - Compliance with conditioned Certificates of Public Need (COPN)

The facility has review its COPN conditions and has determined that:

Conditioned COPNs are applicable to the facility : Yes

Conditioned COPNs are applicable to the facility and the facility has met the conditioned requirements.
Pursuant to 12VAC5-410-70, a license cannot be renewed if the agreed upon conditions have not been met. :
Yes

Outpatient Information - Operation Information

Answering these two questions is optional, but will help the Virginia Department of Health better estimate the number of small businesses that have or apply for licenses.

Is the facility/agency independently owned and operated? : Yes

Does the facility/agency have fewer than 500 employees? : Yes

Certification and Submission

By submitting this application, I hereby certify that the information contained in this application and any attachments are true, accurate, and complete

Name and Title of Authorized Representative : Julie Billingsley, Administrator

Date : 10/9/2024