

MRI Service Utilization List, May 1, 2012

HOSPITAL-BASED FACILITIES

Reporting Period January 1, 2011 through December 31, 2011

Service ID	BHS ID	Service Name	No. of Clinical Units <u>1</u>	No. of Visits	No. of AP <u>2</u>	No. of AAP	
030189	380010	Allegiance Health	1	6,418	9,627	<u>5, 10</u>	0
010474	040010	Alpena General Hospital	1	3,357	7,757	<u>6</u>	0
010028	130031	Battle Creek Health System	1	5,617	9,438		1,437
050315	090050	Bay Regional Medical Ctr	1	6,807	10,196		1,681
080102	820030	Beaumont Hospital/Grosse Pointe	1	5,480	10,175		2,158
100351	630050	Botsford Hospital	1	371	819	<u>3</u>	0
990024	390020	Bronson Methodist Hospital	2	9,203	18,303		2,270
040321	590010	Carson City Hospital	1	2,933	5,040	<u>6</u>	0
040272	370010	Central Michigan Comm Hospital	1	3,789	7,101	<u>6</u>	0
930088	832601	Children's Hospital of Michigan	1	3,505	10,986		2,973
030082	830080	Childrens of Mich/Ded. Ped. Unit	1	2,844	7,098	<u>7</u>	0
050222	170020	Chippewa County War Memorial	1	3,168	6,133	<u>6</u>	0
050340	120010	Community Health Ctr-Branch Co	1	2,349	4,656	<u>6</u>	0
070239	730020	Covenant North - Cooper	2	7,364	16,844	<u>5, 10</u>	0
020360	220020	Dickinson County Memorial Hosp	1	3,171	9,218	<u>6</u>	1,060
040442	460020	Emma L Bixby Med Ctr	1	3,317	6,660	<u>6</u>	0
030343	820070	Garden City Osteo Hospital	1	3,389	6,194		0
030117	290010	Gratiot Medical Center	1	3,519	7,948	<u>6</u>	0
840266	830220	Harper Hospital	3	11,805	28,839	<u>10</u>	0
650161	830190	Henry Ford Hospital	3	11,452	29,661		4,578
090276	830190	Henry Ford Hospital IMRI	1	1,070	3,451	<u>11</u>	0
070207	500110	Henry Ford Macomb Hospital	1	6,682	10,451		2,449
070505	630176	Henry Ford Med Ctr/W Bloomfield	2	8,295	19,698	<u>5</u>	0
040525	820230	Henry Ford Wyandotte Hosp	2	6,166	13,993	<u>5</u>	0
040223	300010	Hillsdale Community Hlth Ctr	1	2,610	4,744	<u>6</u>	0
030240	700020	Holland Community Hospital	1	7,148	9,509		1,510
100180	250040	Hurley Medical Center	1	2,880	5,552	<u>8</u>	0
060416	630014	Huron Valley-Sinai Hospital	1	5,464	10,104		1,585
030472	330020	Ingham Regional Med Ctr, Greenlawn	1	5,879	9,870		1,772
080445	830520	Karmanos Cancer Center Hospital	1	1,332	2,857	<u>8</u>	0
010031	110050	Lakeland Medical Ctr-St. Joseph	1	3,589	7,570		0
040344	440010	Lapeer Regional Hospital	1	3,903	6,139		0
650108	520050	Marquette General Hospital	2	5,975	14,516	<u>6</u>	0
050183	540030	Mecosta County General Hospital	1	3,102	5,232	<u>6</u>	0
030414	780010	Memorial Healthcare Ctr/Owosso	1	3,146	6,857	<u>6</u>	0

Service ID	BHS ID	Service Name	No. of Clinical Units <u>1</u>	No. of Visits	No. of AP <u>2</u>	No. of AAP	
050071	530010	Memorial Med Ctr of West Mich	1	2,585	5,493	<u>6</u>	0
030017	610020	Mercy General Health Partners	1	5,330	7,784		0
040202	840010	Mercy Hospital/Cadillac	1	3,427	7,868	<u>6</u>	0
040435	200020	Mercy Hospital/Grayling	1	2,708	5,656	<u>6</u>	0
040333	580030	Mercy Memorial Hospital/Monroe	1	4,671	7,353		0
060021	410060	Metro Health Hospital	2	10,547	16,422		422
030036	560020	MidMichigan Medical Center-Midland	2	9,548	21,729	<u>6</u>	5,461
660028	280010	Munson Medical Center	2	9,132	22,976	<u>6</u>	2,980
660027	240030	Northern Michigan Hospital	2	5,747	12,849	<u>5, 6</u>	0
090177	130080	Oaklawn Hospital	1	1,959	2,888		0
060133	820010	Oakwood Annapolis Hospital	1	5,613	11,115		1,843
650162	820120	Oakwood Hospital & Medical Ctr	1	5,659	9,686		910
050440	690020	Otsego County Memorial Hospital	1	3,231	7,010	<u>6</u>	0
040480	080010	Pennock Hospital	1	2,419	3,201		0
060196	310020	Portage Health System	1	1,864	3,510	<u>6</u>	0
910234	630130	Providence Hospital	2	7,817	16,042		32
020422	630177	Providence Hospital MC-Prov. Park	2	7,686	15,261	<u>5</u>	0
070516	830450	Sinai-Grace Hospital	1	4,463	8,514		507
950133	410010	Spectrum Health Blodgett Campus	2	5,615	10,495	<u>5</u>	0
090207	590060	Spectrum Health United Memorial	1	3,745	9,722		1,722
890326	410040	Spectrum Health-Butterworth Campus	2	8,998	20,726		4,725
060466	410040	Spectrum/Butterworth Ded. Pediatric	2	4,412	12,386	<u>7</u>	0
040227	210010	St. Francis Hospital	1	3,092	5,985	<u>6</u>	0
910230	830420	St. John Hospital & Med Ctr	1	4,591	9,731		1,712
990133	500070	St. John Macomb Hospital	1	3,522	6,285		0
870341	810030	St. Joseph Mercy Hosp/Ann Arbor	3	15,867	28,379		4,369
940181	630140	St. Joseph Mercy Oakland	2	6,416	12,868		0
060401	470020	St. Joseph Mercy/Livingston	1	3,469	5,775		0
030157	820190	St. Mary Hospital/Livonia	1	3,825	6,516		0
990023	410080	St. Mary's Health Services/GR	2	10,803	19,045		2,614
850065	730050	St. Mary's Med Ctr/Saginaw	2	5,653	11,568		0
060098	350010	Tawas St. Joseph Hospital	1	2,108	4,428	<u>6</u>	0
030121	810060	University of Mich/Ded. Pediatric	3	3,755	14,995	<u>7</u>	0
840227	810060	University of Michigan Hospitals	4	17,035	46,329	<u>5</u>	6,328
060067	650010	West Branch Regional Med Ctr	1	2,447	5,253	<u>6</u>	0
070205	510020	West Shore Hospital	1	1,546	3,474	<u>6</u>	0
650163	630030	William Beaumont Hospital-Royal Oak	6	25,529	54,050		5,498
960174	630160	William Beaumont Hospital-Troy	3	16,087	28,047		4,040

**MRI Service Utilization List
May 1, 2012 Footnotes**

AP – Adjusted Procedures

AAP – Available Adjusted Procedures

- 1 - Includes existing, approved, and applications for additional magnets that have been deemed submitted or under appeal.
- 2 - Adjustments are defined in Section 13 of the Certificate of Need Review Standards for Magnetic Resonance Imaging.
- 3 - New MRI service, not a full year of data available for this reporting period.
- 4 - This MRI site submitted an application for a fixed MRI unit/service under Section 3(2) of the currently approved MRI Standards. Section 15(1)(a)(ii) states "the MRI adjusted procedures, from the host site routes utilized to meet the requirements of Section 3(2)(c), shall be excluded beginning at the time the application is submitted and for three years from the date the fixed MRI unit becomes operational."
- 5 - This fixed MRI Service has applied for expansion under Section 5(1)(b). Section 15(1)(a)(iii) states that "the MRI adjusted procedures utilized to meet the requirements of Section 5(1)(b) shall be reduced by 8,000 and shall be excluded beginning at the time of the application is deemed submitted and for three years from the date the new fixed MRI unit becomes operational."
- 6 - Fixed MRI services located in rural or micropolitan statistical areas are subject to the provisions of Section 13(2)(e) when proposing a subsequent fixed MRI unit (second, third, etc.) according to Section 5(1).
- 7 - This MRI Service is a dedicated pediatric magnet that was approved under Section 9. Section 15(1)(a)(i) states "dedicated pediatric MRI approved pursuant to Section 9 shall be excluded."
- 8 – The magnet at this site was relocated from an original site with footnote no. 10 in accordance with Section 6(2). For volume purposes, however, these sites will be combined as one service for a period of 3 years from the start of clinical operation of the relocated magnet. Available adjusted procedures for either site will be reported under the original site.
- 9 – This MRI service does not have a full year of data due to missing data, invalid data, or the service not operating during a quarter(s).
- 10 – A fixed magnet from this MRI Service has been relocated in accordance with Section 6(2). The relocated magnet will be shown as a new MRI Service with footnote no. 8. All data from the relocated magnet will be reported at the new service site. For volume purposes, however, these sites will be combined as one service for a period of 3 years from the start of clinical operation of the relocated magnet. Available adjusted procedures for either site will be reported under the original site.
- 11 - This MRI Service is an Intra-operative MRI that was approved under Section 10. Section 10(8) states "The applicant shall not utilize the procedures performed on the IMRI unit to demonstrate need or to satisfy MRI CON review standards requirements."

Note: The data represents all accepted data available to the department for the January 1, 2011 through December 31, 2011 reporting period. The data does not include:

- a. Data that was not submitted on a timely basis.
- b. Data that has not completed system edits.
- c. The subtraction of doctor commitments for Certificate of Need applications for Magnetic Resonance Imaging services that were filed on or after the above report preparation date.

Source: Certificate of Need Review Standards for MRI Services (Effective November 11, 2011)
Certificate of Need Section, Michigan Department of Community Health