

**MRI Service Utilization List, November 1, 2016**  
**MOBILE ROUTES #66 - #75**  
**Reporting Period July 1, 2015 through June 30, 2016**

Service ID BHS ID	Service Name	No. of Clinical <u>1</u>	No. of Visits	No. of AP <u>2</u>	No. of AAP
<b>960287</b>	<b>Mobile #66</b>	<b>2</b>	<b>7,613</b>	<b>11,981</b>	<b>0</b>
63C733	Beaumont Med Ctr/West Bloomfield		2,799	4,175	
150021	Charlevoix Area Hospital		452	853	
230021	Eaton Rapids Medical Center		448	625	
230022	Hayes Green Beach Memorial Hospital		484	704	
50C691	Henry Ford Macomb Health Ctr/Shelby		265	369	
780010	Memorial Healthcare		273	590	
746815	Mercy Health Center		224	272	
63C052	ROMRI, LLC		1,813	2,792	
740030	St. John River Distrist Hospital		306	504	
060020	St. Mary's Standish Comm Hosp		549	1,097	
<b>960309</b>	<b>Mobile #67</b>	<b>1</b>	<b>2,302</b>	<b>3,302</b>	<b>0</b>
060020	Saint Mary's Standish		12	22	
736811	St. Mary's of Mich. Towne Cntr		2,290	3,280	
<b>970008</b>	<b>Mobile #68</b>	<b>1</b>	<b>2,434</b>	<b>4,227</b>	<b>0</b>
190011	Clinton Memorial Hospital		1,308	1,938	
340021	Ionia County Memorial Hosp		1,126	2,289	
<b>990128</b>	<b>Mobile #73</b>	<b>1</b>	<b>3,385</b>	<b>4,324</b>	<b>0</b>
63C690	Clarkston Ambulatory Corp.		697	954	
50C628	Mich Resonance Imag-McLaren Macomb		73	108	
63C797	Mich Resonance Imaging/POH		265	409	
63C736	Michigan Resonance Imaging/Troy		572	687	
63C892	Michigan Resonance Img/Auburn		1,259	1,438	
50C630	Neurosurgery Group, PC/MI Resonance		53	73	
63C670	Oxford Community Clinic		466	655	
<b>970337</b>	<b>Mobile #75</b>	<b>2</b>	<b>4,581</b>	<b>7,246</b>	<b>245</b>
140010	Borgess-Lee Memorial Hospital		240	329	
030030	Borgess-Pipp Health Center		264	475	
33C007	Compass Rehab Center		1,782	2,822	
110040	Lakeland Community Hosp/Watervliet		355	503	
822646	Southgate Radiology		161	239	
13C011	Southwest MI Imag.-Borgess Hlth		396	596	
39C001	Southwest MI Imaging Ctr		79	110	
39C014	Southwest Mich. Imag. Ctr./Westside		178	236	
39C008	Southwest Mich. Img. Ctr/Woodbridge		492	651	
750020	Three Rivers Health		634	1,285	

## MRI Service Utilization List November 1, 2016 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 15 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 17(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 17(1)(a)(iii) states that “the MRI adjusted procedures utilized to meet the requirements of Section 5(1) shall be reduced by 8,000 and shall be excluded beginning at the time of the application is submitted and for three years from the date the fixed MRI unit becomes operational.”
- 6 - Fixed MRI services located in rural or micropolitan statistical areas are subject to the provisions of Section 15(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 8. Section 17(1)(a)(i) states “dedicated pediatric MRI approved pursuant to Section 8 shall be excluded.”
- 8 – The magnet at this site was relocated from an original site with footnote no. 10 in accordance with Section 4(6). 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 4(6). 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 9. Section 9(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 July 1, 2015 through June 30, 2016 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 December 22, 2014)  
Certificate of Need Section, Michigan Department of Health and Human Services