

MRI Service Utilization List, May 1, 2010

MOBILE ROUTES #187 - #202

Reporting Period January 1, 2009 through December 31, 2009

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
070047	Mobile #187	1	3,415	12,446	0
670021	Spectrum Health - Reed City		3	6	
590060	Spectrum Health United Memorial		3,412	12,440	<u>4</u>
080390	Mobile #202	1	2,844	4,223	0
610010	Mercy Health Partners, Hackley Camp		2,628	3,827	<u>3</u>
640020	Mercy Health Partners, Lakeshore Ca		216	396	<u>3</u>

MRI Service Utilization List, May 1, 2010

Footnotes

AP – Adjusted Procedures

AAP – Available Adjusted Procedures

- 1 - Includes existing, approved, and applications for additional magnets that have been deemed complete 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 MRI Service has applied for expansion under Section 5(1). Section 15(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 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 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 - This MRI service submitted an application for expansion of a mobile MRI service under Section 5(1)(a) of the currently approved MRI Standards. In compliance with CON Statute the number of Clinical Units is increased consistent with the date the application was deemed submitted.
 - 9 – Missing or invalid data for this reporting period.
- Note: These data represent all accepted data available to the Department for the July 1, 2008 through June 30, 2009 reporting period. These data DO 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.
10. A fixed magnet from this MRI Service has been acquired by another entity. In accordance with the requirements of Section 7(2) this magnet and utilization data will be reported by this MRI Service.

Source: Certificate Of Need Review Standards For Magnetic Resonance Imaging Services (Effective November 5, 2009)
Health Policy And Access Division