

MRI Service Utilization List, May 1, 2010

MOBILE ROUTES #96 - #113

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
010074	Mobile #96	1	2,899	4,500	0
620010	Gerber Memorial Hospital		30	41	
50C626	Harper Metro Radiology		458	690	
230020	Hayes Green Beach Memorial Hospital		294	403	
130080	Oaklawn Hospital		1,985	3,117	<u>4</u>
590060	Spectrum Health United Memorial		132	249	
010285	Mobile #105	1	3,084	4,740	0
030032	Allegan General Hospital		543	1,131	
620010	Gerber Memorial Hospital		1,957	2,748	
50C626	Harper Metro Radiology		489	697	
780010	Memorial Healthcare Ctr/Owosso		11	27	
41C011	Orthopedic Assoc of Grand Rapids		26	29	
820190	St. Mary Hospital/Livonia		56	106	
09C002	St. Mary's of Mich. Med. Img./Bay		2	2	
010299	Mobile #106	1	3,015	4,587	0
63C690	Clarkston Ambulatory Corp.		730	1,020	
63C797	Mich Resonance Imaging/POH		607	919	
63C724	Michigan Resonance Imag/Crittenton		987	1,643	<u>4</u>
50C603	Mt. Clemens Medical Office		15	20	
50C630	Neurosurgery Group, P.C.		304	470	
63C670	Oxford Community Clinic		372	515	
010385	Mobile #109	1	3,034	4,779	0
810080	Chelsea Community Hospital		1,052	1,684	<u>4</u>
630060	DMC Surgery Hospital		89	129	
620010	Gerber Memorial Hospital		285	410	
50C626	Harper Metro Radiology		185	276	
230020	Hayes Green Beach Memorial Hospital		765	1,066	
630110	North Oakland Medical Ctrs		428	666	
750010	Sturgis Hospital		230	548	
010446	Mobile #112	1	4,025	6,040	0
63C716	Mich Neuro Assoc/Clarkston		6	10	
50C617	Mich Neuro Assoc/Utica		402	610	
50C648	Michigan Neuro Assoc/Clinton Twp		2,152	3,247	
50C607	Michigan Neuro Assoc/St Clair Shore		1,465	2,173	
020016	Mobile #113	1	1,511	2,209	0
39C001	Southwest Mich Imaging Ctr		205	341	
39C014	Southwest Mich. Imag./Westside		634	894	
39C008	Southwest Mich. Imag./Woodbridge		672	974	

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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