Certificate of Need MRI Standards Workgroup Draft Language for Agenda Item IV.

Section 4

(4) An applicant proposing to replace an existing mobile MRI host site to a new location shall demonstrate the following:

(a) The applicant currently operates the MRI mobile host site to be relocated.

(b) The MRI mobile host site to be relocated has been in operation for at least 36 **24** months as of the date an application is submitted to the Department.

(c) The proposed new site is within a 5-mile radius of the existing site for a metropolitan statistical area county or within a 10-mile radius for a rural or micropolitan statistical area county.

(d) The mobile MRI host site to be relocated performed at least the applicable minimum number of MRI adjusted procedures set forth in Section 14 based on the most recently published MRI Service Utilization List as of the date an application is deemed submitted by the Department.

(e) The relocation will not involve a change in the current central service coordinator unless the

requirements of Section 3(5) are met.

(5) An applicant proposing to replace an existing fixed MRI service and its unit(s) to a new site shall demonstrate the following:

(a) The existing MRI service and its unit(s) to be replaced has been in operation for at least 36 months as of the date an application is submitted to the Department.

(b) The proposed new site is within a 10-mile radius of the existing site.

(c) Each existing MRI unit to be relocated performed at least the applicable minimum number of MRI adjusted procedures set forth in Section 14 based on the most recently published MRI Service Utilization List as of the date an application is deemed submitted by the Department, **unless one of the following requirements are met:**

(i) The owner of the building where the site is located has incurred a filing for bankruptcy within the last three years, or from the change of ownership date if the facility has come under common ownership or control within 24 months of the date of the application; or

(ii) The MRI service being replaced as part of the replacement of an entire hospital to a new geographic site.

Certificate of Need MRI Standards Workgroup

Draft Language for Agenda Item IV.

Section 6. Requirements to acquire an existing MRI service or an existing MRI unit(s)

Sec. 6. (1) An applicant proposing to acquire an existing fixed or mobile MRI service and its unit(s) shall demonstrate the following:

- (a) THE APPLICANT shall not be required to be in compliance with the volume requirements applicable to a seller/lessor on the date the acquisition occurs IF THE PROPOSED PROJECT MEETS ONE OF THE FOLLOWING:
 - (1) For the first application proposing to acquire an existing fixed or mobile MRI service on or after July 1, 1997, the existing MRI service and its unit(s) to be acquired.
 - (2) THE EXISTING FIXED OR MOBILE MRI SERVICE IS OWNED BY, IS UNDER COMMON CONTROL OF, OR HAS COMMON OWNERSHIP AS THE EXISTING FIXED OR MOBILE SERVICE.
- (b) For any application proposing to acquire an existing fixed or mobile MRI service and its unit(s), except the first AN application approved pursuant to subsection (a), an applicant shall be required to document that the MRI service and its unit(s) to be acquired is operating in compliance with the volume requirements set forth in Section 14 of these standards applicable to an existing MRI service on the date the application is submitted to the Department.

(2) An applicant proposing to acquire an existing fixed or mobile MRI unit of an existing MRI service shall demonstrate that the proposed project meets all of the following:

- (a) The project will not change the number of MRI units at the site of the MRI service being acquired, subject to the applicable requirements under Section 4(6), unless the applicant demonstrates that the project is in compliance with the requirements of the initiation or expansion Section, as applicable.
- (b) The project will not result in the replacement of an MRI unit at the MRI service to be acquired unless the applicant demonstrates that the requirements of the replacement section have been met.

(3) THE MRI SERVICE SHALL BE OPERATING AT THE APPLICABLE VOLUME REQUIIREMENTS SET FORTH IN SECTION 14 OF THESE STANDARDS IN THE SECOND 12 MONTHS AFTER THE EFFECTIVE DATE OF THE ACQUISITION AND ANNUALLY THEREAFTER.

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MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

CERTIFICATE OF NEED (CON) REVIEW STANDARDS FOR MAGNETIC RESONANCE IMAGING (MRI) SERVICES

6 (By authority conferred on the CON Commission by Section 22215 of Act No. 368 of the Public Acts of 7 1978, as amended, and sections 7 and 8 of Act No. 306 of the Public Acts of 1969, as amended, being 8 sections 333.22215, 24.207, and 24.208 of the Michigan Compiled Laws.)

10 Section 1. Applicability

Sec. 1. These standards are requirements for the approval of the initiation, expansion, replacement, or acquisition of MRI services and the delivery of services under Part 222 of the Code. Pursuant to Part 222 of the Code, MRI is a covered clinical service. The Department shall use these standards in applying Section 22225(1) of the Code, being Section 333.22225(1) of the Michigan Compiled Laws and Section 22225(2)(c) of the Code, being Section 333.22225(2)(c) of the Michigan Compiled Laws.

18 Section 2. Definitions

20 Sec. 2. (1) For purposes of these standards:

(a) "Acquisition of an existing MRI service or existing MRI unit(s)" means obtaining control or
 possession of an existing fixed or mobile MRI service or existing MRI unit(s) by contract, ownership,
 lease, or other comparable arrangement.

(b) "Actual MRI adjusted procedures" or "MRI adjusted procedures," means the number of MRI
procedures, adjusted in accordance with the applicable provisions of Section 15, performed on an
existing MRI unit, or if an MRI service has two or more MRI units at the same site, the average number of
MRI adjusted procedures performed on each unit, for the 12-month period reported on the most recently
published "MRI Service Utilization List," as of the date an application is deemed submitted by the
Department.

(c) "Available MRI adjusted procedures" means the number of MRI adjusted procedures 30 31 performed by an existing MRI service in excess of 8,000 per fixed MRI unit and 7,000 per mobile MRI unit. For either a fixed or mobile MRI service, the number of MRI units used to compute available MRI 32 adjusted procedures shall include both existing and approved but not yet operational MRI units. In 33 determining the number of available MRI adjusted procedures, the Department shall use data for the 12-34 month period reported on the most recently published list of available MRI adjusted procedures as of the 35 date an application is deemed submitted by the Department. 36 37 In the case of a mobile MRI unit, the term means the sum of all MRI adjusted procedures performed

by the same mobile MRI unit, the term means the sum of all MRI adjusted procedures performed mobile MRI unit at all of the host sites combined that is in excess of 7,000. For example, if a mobile MRI unit serves five host sites, the term means the sum of MRI adjusted procedures for all five host sites combined that is in excess of 7,000 MRI adjusted procedures.

(d) "Central service coordinator" means the organizational unit that has operational responsibilityfor a mobile MRI unit(s).

(e) "Certificate of Need Commission" or "CON Commission" means the Commission created
 pursuant to Section 22211 of the Code, being Section 333.22211 of the Michigan Compiled Laws.

(f) "Code" means Act No. 368 of the Public Acts of 1978, as amended, being Section 333.1101 <u>et</u>
 <u>seq</u>. of the Michigan Compiled Laws.

- (g) "Contrast MRI procedure" means an MRI procedure involving either of the following: (i) a
 procedure following use of a contrast agent or (ii) procedures performed both before and after the use of
 a contrast agent.
- 50 (h) "Dedicated pediatric MRI" means an MRI unit on which at least 80% of the MRI procedures are 51 performed on patients under 18 years of age
 - (i) "Department" means the Michigan Department of Community Health (MDCH).

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53 (j) "Doctor" means an individual licensed under Article 15 of the Code to engage in the practice of medicine, osteopathic medicine and surgery, chiropractic, dentistry, or podiatry. 54 (k) "Existing MRI service" means either the utilization of a CON-approved and operational MRI 55 56 unit(s) at one site in the case of a fixed MRI service, and in the case of a mobile MRI service, the utilization of a CON-approved and operational mobile MRI unit(s) at each host site, on the date an 57 58 application is submitted to the Department. (I) "Existing MRI unit" means a CON-approved and operational MRI unit used to provide MRI 59 60 services. 61 (m) "Expand an existing fixed MRI service" means an increase in the number of fixed MRI units to be operated by the applicant. 62 63 (n) "Expand an existing mobile MRI service" means the addition of a mobile MRI unit that will be operated by a central service coordinator that is approved to operate one or more mobile MRI units as of 64 the date an application is submitted to the Department. 65 (o) "Group practice" means a group practice as defined pursuant to the provisions of 42 U.S.C. 66 67 1395nn (h)(4), commonly known as Stark II, and the Code of Federal Regulations, 42 CFR, Part 411, published in the Federal Register on August 14, 1995, or its replacement. 68 69 (p) "Health service area" or "HSA" means the geographic areas set forth in Section 21. (q) "Host site" means the site at which a mobile MRI unit is authorized by CON to provide MRI 70 71 services. 72 (r) "Initiate a fixed MRI service" means begin operation of a fixed MRI service at a site that does 73 not provide or is not CON approved to provide fixed MRI services as of the date an application is submitted to the Department. The term does not include the acquisition or replacement of an existing 74 75 fixed MRI service to a new site or the renewal of a lease. (s) "Initiate a mobile MRI host site" means the provision of MRI services at a host site that has not 76 received any MRI services within 12 months from the date an application is submitted to the Department. 77 78 The term does not include the renewal of a lease. (t) "Initiate a mobile MRI service" means begin operation of a mobile MRI unit that serves two or 79 80 more host sites. The term does not include the acquisition of an existing mobile MRI service or the renewal of a 81 82 lease. 83 (u) "Inpatient" means an MRI visit involving an individual who has been admitted to the licensed hospital at the site of the MRI service/unit or in the case of an MRI unit that is not located at that licensed 84 hospital site, an admitted patient transported from a licensed hospital site by ambulance to the MRI 85 86 service. (v) "Institutional review board" or "IRB" means an institutional review board as defined by Public 87 Law 93-348 that is regulated by Title 45 CFR 46. 88 89 (w) "Intra-operative magnetic resonance imaging" or "IMRI" means the integrated use of MRI technology during surgical and interventional procedures within a licensed operative environment. 90 (x) "Licensed hospital site" means the location of the hospital authorized by license and listed on 91 that licensee's certificate of licensure. 92 93 (y) "Magnetic resonance imaging" or "MRI" means the analysis of the interaction that occurs between radio frequency energy, atomic nuclei, and strong magnetic fields to produce cross sectional 94 95 images similar to those displayed by computed tomography (CT) but without the use of ionizing radiation. (z) "MRI adjusted procedure" means an MRI visit, at an existing MRI service, that has been 96 adjusted in accordance with the applicable provisions of Section 15. 97 98 (aa) "MRI database" means the database, maintained by the Department pursuant to Section 14 of these standards, that collects information about each MRI visit at MRI services located in Michigan. 99 (bb) "MRI-guided electrophysiology intervention" or "MRI-guided EPI" means equipment specifically 100 designed for the integrated use of MRI technology for the purposes of electrophysiology interventional 101 procedures within a cardiac catheterization lab. 102 103 (cc) "MRI procedure" means a procedure conducted by an MRI unit approved pursuant to sections 3, 4, 5, 6, 7, or 9 of these standards which is either a single, billable diagnostic magnetic resonance 104

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procedure or a procedure conducted by an MRI unit at a site participating with an approved diagnostic radiology residency program, under a research protocol approved by an IRB. The capital and operating costs related to the research use are charged to a specific research account and not charged to or collected from third-party payors or patients. The term does not include a procedure conducted by an MRI unit approved pursuant to Section 7.

(dd) "MRI services" means either the utilization of an authorized MRI unit(s) at one site in the case
 of a fixed MRI service or in the case of a mobile MRI service, the utilization of an authorized mobile MRI
 unit at each host site.

(ee) "MRI unit" means the magnetic resonance system consisting of an integrated set of machines
 and related equipment necessary to produce the images and/or spectroscopic quantitative data from
 scans including FDA-approved positron emission tomography (PET)/MRI scanner hybrids if used for MRI
 only procedures. The term does not include MRI simulators used solely for treatment planning purposes
 in conjunction with a Megavoltage Radiation Therapy (MRT) unit.

(ff) "MRI visit" means a single patient visit to an MRI service/unit that may involve one or more MRI procedures.

120 (gg) "Medicaid" means title XIX of the social security act, chapter 531, 49 Stat. 620, 1396 to 1396g 121 and 1396i to 1396u.

(hh) "Mobile MRI unit" means an MRI unit operating at two or more host sites and that has a central
 service coordinator. The mobile MRI unit shall operate under a contractual agreement for the provision of
 MRI services at each host site on a regularly scheduled basis.

(ii) "Ownership interest, direct or indirect" means a direct ownership relationship between a doctor
 and an applicant entity or an ownership relationship between a doctor and an entity that has an
 ownership relationship with an applicant entity.

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(jj) "Pediatric patient" means a patient who is 12 years of age or less, except for Section 8.

(kk) "Planning area" means

(i) in the case of a proposed fixed MRI service or unit, the geographic area within a 20-mile radius
 from the proposed site if the proposed site is not in a rural or micropolitan statistical area county and a
 75-mile radius from the proposed site if the proposed site is in a rural or micropolitan statistical area
 county.

(ii) in the case of a proposed mobile MRI service or unit, except as provided in subsection (iii), the
 geographic area within a 20-mile radius from each proposed host site if the proposed site is not in a rural
 or micropolitan statistical area county and within a 75-mile radius from each proposed host site if the
 proposed site is in a rural or micropolitan statistical area county.

(iii) in the case of a proposed mobile MRI service or unit meeting the requirement of Section
 15(2)(d), the health service area in which all the proposed mobile host sites will be located.

(II) "Referring doctor" means the doctor of record who ordered the MRI procedure(s) and either to
 whom the primary report of the results of an MRI procedure(s) is sent or in the case of a teaching facility,
 the attending doctor who is responsible for the house officer or resident that requested the MRI
 procedure.

144 (mm) "Renewal of a lease" means extending the effective period of a lease for an existing MRI unit 145 that does not involve either replacement of the MRI unit, as defined in Section 4, or (ii) a change in the 146 parties to the lease.

147 (nn) "Research scan" means an MRI scan administered under a research protocol approved by the 148 applicant's IRB.

149 (oo) "Re-sedated patient" means a patient, either pediatric or adult, who fails the initial sedation 150 during the scan time and must be extracted from the unit to rescue the patient with additional sedation.

(pp) "Sedated patient" means a patient that meets all of the following:

(i) whose level of consciousness is either conscious-sedation or a higher level of sedation, as
 defined by the American Association of Anesthesiologists, the American Academy of Pediatrics, the Joint
 Commission on the Accreditation of Health Care Organizations, or an equivalent definition.

155 (ii) who is monitored by mechanical devices while in the magnet.

(iii) who requires observation while in the magnet by personnel, other than employees routinely
 assigned to the MRI unit, who are trained in cardiopulmonary resuscitation (CPR).
 (qq) "Site" means

159 (i) in the case of a licensed hospital site, a location that is part of the licensed hospital site or a 160 location that is contiguous to the licensed hospital site or

161 (ii) in the case of a location that is not a licensed hospital site, a location at the same address or a 162 location that is contiguous to that address.

163 (rr) "Special needs patient" means a non-sedated patient, either pediatric or adult, with any of the 164 following conditions: down syndrome, autism, attention deficit hyperactivity disorder (ADHD),

developmental delay, malformation syndromes, hunter's syndrome, multi-system disorders, psychiatric
 disorders, <u>IMPLANTABLE CARDIAC DEVICES (ICDS)</u>, and other conditions that make the patient
 unable to comply with the positional requirements of the exam <u>OR IS UNABLE TO COMPLY WITH THE</u>
 MOTIONLESS REQUIREMENTS AND WHOSE RESULTING MOVEMENTS RESULT IN NON DIAGNOSTIC QUALITY IMAGES THEREFORE REQUIRING THE TECHNOLOGIST TO REPEAT THE
 SAME SEQUENCE IN AN ATTEMPT TO OBTAIN A DIAGNOSTIC QUALITY IMAGE.

(ss) "Teaching facility" means a licensed hospital site, or other location, that provides either fixed or
 mobile MRI services and at which residents or fellows of a training program in diagnostic radiology, that is
 approved by the Accreditation Council on Graduate Medical Education or American Osteopathic
 Association, are assigned.

(tt) "Unadjusted MRI scan" means an MRI procedure performed on a single anatomical site as
 defined by the MRI database and that is not adjusted pursuant to the applicable provisions of Section 15.

(2) Terms defined in the Code have the same meanings when used in these standards.

180 Section 3. Requirements to initiate an MRI service181

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182 Sec. 3. An applicant proposing to initiate an MRI service or a host site shall demonstrate the 183 following requirements, as applicable:

(1) An applicant proposing to initiate a fixed MRI service shall demonstrate 6,000 available MRI
 adjusted procedures per proposed fixed MRI unit from within the same planning area as the proposed
 service/unit.

- 189 (2) An applicant proposing to initiate a fixed MRI service that meets the following requirements 190 shall not be required to be in compliance with subsection (1):
 - (a) The applicant is currently an existing host site.
 - (b) The applicant has received in aggregate, one of the following:
 - (i) At least 6,000 MRI adjusted procedures.
 - (ii) At least 4,000 MRI adjusted procedures and the applicant meets all of the following:

(A) Is located in a county that has no fixed MRI machines that are pending, approved by the

- Department, or operational at the time the application is deemed submitted.
- (B) The nearest fixed MRI machine is located more than 15 radius miles from the application site.
- (iii) At least 3,000 MRI adjusted procedures and the applicant meets all of the following:
- (A) The proposed site is a hospital licensed under Part 215 of the Code.
- (B) The applicant hospital operates an emergency room that provides 24-hour emergency care
 services and at least 20,000 visits within the most recent 12-month period for which data, verifiable by the
 Department, is available.
- (c) All of the MRI adjusted procedures from the mobile MRI service referenced in Section 3(2)(b)
 shall be utilized even if the aggregated data exceeds the minimum requirements.

(d) The applicant shall install the fixed MRI unit at the same site as the existing host site or within
 the relocation zone. If applying pursuant to Section 3(2)(b)(iii), the applicant shall install the fixed MRI
 unit at the same site as the existing host site.

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- 208 (e) The applicant shall cease operation as a host site and not become a host site for at least 12 months from the date the fixed service and its unit becomes operational. 209 210 211 (3) An applicant proposing to initiate a mobile MRI service shall demonstrate 5,500 available MRI adjusted procedures from within the same planning area as the proposed service/unit, and the applicant 212 213 shall meet the following: (a) Identify the proposed route schedule and procedures for handling emergency situations. 214 (b) Submit copies of all proposed contracts for the proposed host site related to the mobile MRI 215 216 service. (c) Identify a minimum of two (2) host sites for the proposed service. 217 218 219 (4) An applicant, whether the central service coordinator or the host site, proposing to initiate a host site on a new or existing mobile MRI service shall demonstrate the following, as applicable: 220 (a) 600 available MRI adjusted procedures, from within the same planning area as the proposed 221 222 service/unit, for a proposed host site that is not located in a rural or micropolitan statistical area county, or 223 (b) 400 available MRI adjusted procedures from within the same planning area for a proposed host site that is located in a rural or micropolitan statistical area county, and 224 (c) The proposed host site has not received any mobile MRI service within the most recent 12-225 226 month period as of the date an application is submitted to the Department. 227 228 (5) An applicant proposing to add or change service on an existing mobile MRI service that meets the following requirements shall not be required to be in compliance with subsection (4): 229 (a) The host site has received mobile MRI services from an existing mobile MRI unit within the 230 most recent 12-month period as of the date an application is submitted to the Department. 231 232 (b) Submit copies of all proposed contracts for the proposed host site related to the mobile MRI 233 service. 234 (6) The applicant shall demonstrate that the available MRI adjusted procedures from the "Available 235 MRI Adjusted Procedures List" or the adjusted procedures from the "MRI Service Utilization List." as 236 applicable, are from the most recently published MRI lists as of the date an application is deemed 237 238 submitted by the Department. 239 240 Section 4. Requirements to replace an existing MRI unit 241 Sec. 4. Replace an existing MRI unit means (i) any equipment change involving a change in, or 242 replacement of, the entire MRI unit resulting in an applicant operating the same number and type (fixed or 243 mobile) of MRI units before and after project completion or (ii) an equipment change that involves a 244 capital expenditure of \$750,000 or more in any consecutive 24-month period or (iii) the renewal of a 245 246 lease. Replacement also means the relocation of an MRI service or unit to a new site. The term does not include the replacement of components of the MRI system, including the magnet, under an existing 247 248 service contract or required maintenance to maintain the system to operate within manufacturer 249 specifications. The term does not include an upgrade to an existing MRI unit or repair of an existing MRI service or unit, and it does not include a host site that proposes to receive mobile MRI services from a 250 different central service coordinator if the requirements of Section 3(5) have been met. 251 252 253 (1) "Upgrade an existing MRI unit" means any equipment change that (i) does not involve a change in, or replacement of, the entire MRI unit, does not result in an 254 255 increase in the number of MRI units; or does not result in a change in the type of MRI unit (e.g., changing a mobile MRI unit to a fixed MRI unit); and 256 (ii) involves a capital expenditure related to the MRI equipment of less than \$750,000 in any 257
- consecutive 24-month period.

260	(2) "Repair an existing MRI unit" means restoring the ability of the system to operate within the
261	manufacturer's specifications by replacing or repairing the existing components or parts of the system,
262	including the magnet, pursuant to the terms of an existing maintenance agreement WITH THE
263	MANUFACTURER OF THE MRI UNIT that does not result in a change in the strength of the MRI unit.
264	
265	(3) An applicant proposing to replace an existing MRI unit shall demonstrate the following
266	requirements <mark>, as applicable</mark> :
267	(a) An applicant shall demonstrate that the applicable MRI adjusted procedures are from the most
268	recently published MRI Service Utilization List as of the date an application is deemed submitted by the
269	Department. An applicant proposing to replace an existing MRI unit that is below 1 tesla with an MRI
270	unit that is a 1 tesla or higher, shall be exempt once, as of September 18, 2013, from the minimum
271	volume requirements for replacement:
272	(i) Each existing mobile MRI unit on the network has performed at least an average of 5,500 MRI
273	adjusted procedures per MRI unit.
274	(ii) Each existing fixed MRI unit at the current site has performed at least an average of 6,000 MRI
275	adjusted procedures per MRI unit unless the applicant demonstrates compliance with one of the
276	following:
277	(A) The existing fixed MRI unit initiated pursuant to Section 3(2)(b)(ii) has performed at least 4,000
278	MRI adjusted procedures and is the only fixed MRI unit at the current site.
279	(B) The existing fixed MRI unit initiated pursuant to Section 3(2)(b)(iii) has performed at least 3,000
280	MRI adjusted procedures and is the only fixed MRI unit at the current site.
281	(iii) Each existing dedicated pediatric MRI unit at the current site has performed at least an average
282	of 3,500 MRI adjusted procedures per MRI unit.
283	(b) Equipment that is replaced shall be removed from service and disposed of or rendered
284	considerably inoperable on or before the date that the replacement equipment becomes operational.
285	(eb) The replacement unit shall be located at the same site.
286	(dc) An applicant proposing to replace an existing MRI unit that does not involve a renewal of a
287	lease shall demonstrate that the MRI unit to be replaced is fully depreciated according to generally
288	accepted accounting principles; the existing equipment clearly poses a threat to the safety of the public;
289	or the proposed replacement equipment offers a significant technological improvement which enhances
290	quality of care, increases efficiency, and reduces operating costs.
291	(4) An applicant propaging to replace an existing mobile MPI hast site to a new location shall
292 293	(4) An applicant proposing to replace an existing mobile MRI host site to a new location shall demonstrate the following:
293 294	(a) The applicant currently operates the MRI mobile host site to be relocated.
294 295	(a) The applicant currently operates the MRT mobile host site to be relocated. (b) The MRI mobile host site to be relocated has been in operation for at least 36 months as of the
295	date an application is submitted to the Department.
290	(c) The proposed new site is within a 5-mile radius of the existing site for a metropolitan statistical
298	area county or within a 10-mile radius for a rural or micropolitan statistical area county.
299	(d) The mobile MRI host site to be relocated performed at least the applicable minimum number of
300	MRI adjusted procedures set forth in Section 14 based on the most recently published MRI Service
301	Utilization List as of the date an application is deemed submitted by the Department.
302	(e) The relocation will not involve a change in the current central service coordinator unless the
303	requirements of Section 3(5) are met.
304	
305	(5) An applicant proposing to replace an existing fixed MRI service and its unit(s) to a new site
306	shall demonstrate the following:
307	(a) The existing MRI service and its unit(s) to be replaced has been in operation for at least 36
308	months as of the date an application is submitted to the Department.
309	(b) The proposed new site is within a 10-mile radius of the existing site.

310 (c) Each existing MRI unit to be relocated performed at least the applicable minimum number of MRI adjusted procedures set forth in Section 14 based on the most recently published MRI Service 311 Utilization List as of the date an application is deemed submitted by the Department. 312 313 (6) An applicant proposing to replace a fixed MRI unit of an existing MRI service to a new site shall 314 315 demonstrate the following: (a) The applicant currently operates the MRI service from which the unit will be relocated. 316 (b) The existing MRI service from which the MRI unit(s) to be relocated has been in operation for 317 318 at least 36 months as of the date an application is submitted to the Department. (c) The proposed new site is within a 10-mile radius of the existing site. 319 320 (d) Each existing MRI unit at the service from which a unit is to be relocated performed at least the applicable minimum number of MRI adjusted procedures set forth in Section 14 based on the most 321 recently published MRI Service Utilization List as of the date an application is deemed submitted by the 322 Department. 323 324 (e) For volume purposes, the new site shall remain associated to the original site for a minimum of 325 three years. 326 Section 5. Requirements to expand an existing MRI service 327 328 329 Sec. 5. An applicant proposing to expand an existing MRI service shall demonstrate the following: 330 (1) An applicant shall demonstrate that the applicable MRI adjustable procedures are from the 331 most recently published MRI Service Utilization List as of the date of an application is deemed submitted 332 by the Department: 333 334 (a) Each existing MRI unit on the network has performed at least an average of 9,000 MRI 335 adjusted procedures per MRI unit. (b) Each existing fixed MRI unit at the current site has performed at least an average of 11,000 336 MRI adjusted procedures per MRI unit. 337 (c) Each existing dedicated pediatric MRI unit at the current site has performed at least an average 338 of 3,500 MRI adjusted procedures per MRI unit. 339 340 (2) The additional fixed unit shall be located at the same site unless the requirements of the 341 replacement section have been met. 342 343 Section 6. Requirements to acquire an existing MRI service or an existing MRI unit(s) 344 345 346 Sec. 6. (1) An applicant proposing to acquire an existing fixed or mobile MRI service and its unit(s) shall demonstrate the following: 347 348 (a1) For the first application proposing to acquire an existing fixed or mobile MRI service on or after July 1, 1997, the existing MRI service and its unit(s) to be acquired shall not be required to be in 349 350 compliance with the volume requirements applicable to a seller/lessor on the date the acquisition occurs. The MRI service shall be operating at the applicable volume requirements set forth in Section 14 of 351 352 these standards in the second 12 months after the effective date of the acquisition, and annually thereafter. 353 354 355 (b2)For any application proposing to acquire an existing fixed or mobile MRI service and its unit(s), except the first application approved pursuant to subsection (a), an applicant shall be required to 356 357 document that the MRI service and its unit(s) to be acquired is operating in compliance with the volume requirements set forth in Section 14 of these standards applicable to an existing MRI service on the date 358 359 the application is submitted to the Department. 360

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361 362	(23) An applicant proposing to acquire an existing fixed or mobile MRI unit of an existing MRI service shall demonstrate that the proposed project meets all of the following, <u>AS APPLICABLE</u> :
363 364	(a) THE FIXED MRI UNIT(S) TO BE ACQUIRED PERFORMED AT LEAST 6,000 MRI ADJUSTED PROCEDURES PER FIXED MRI UNIT IN THE MOST RECENT 12-MONTH PERIOD FOR WHICH THE
365	DEPARTMENT HAS VERIFIABLE DATA.
366	(b) THE MOBILE MRI UNIT(S) TO BE ACQUIRED PERFORMED AT LEAST 5,500 MRI
367	ADJUSTED PROCEDURES PER MOBILE MRI UNIT IN THE MOST RECENT 12-MONTH PERIOD FOR
368	WHICH THE DEPARTMENT HAS VERIFIABLE DATA.
369	(c) The project will not change the number of MRI units at the site of the MRI service FROM
370	WHICH THE NUMBER OF UNITS ARE being acquired, subject to the applicable requirements under
371	Section 4(6), unless the applicant demonstrates that the project is in compliance with the requirements of
372	the initiation or expansion Section, as applicable.
373	(bd) The project will not result in the replacement of an MRI unit at the MRI service to be acquired
374 375	unless the applicant demonstrates that the requirements of the replacement section have been met.
376 377	Section 7. Requirements to establish a dedicated research MRI unit
378	Sec. 7. An applicant proposing an MRI unit to be used exclusively for research shall demonstrate the
379	following:
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381	(1) The applicant agrees that the dedicated research MRI unit will be used primarily (70% or more
382	of the procedures) for research purposes only.
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384	(2) Submit copies of documentation demonstrating that the applicant operates a diagnostic
385	radiology residency program approved by the Accreditation Council for Graduate Medical Education, the
386	American Osteopathic Association, or an equivalent organization.
387	
388	(3) Submit copies of documentation demonstrating that the MRI unit shall operate under a protocol
389	approved by the applicant's IRB.
390	
391	(4) An applicant meeting the requirements of this section shall be exempt from meeting the
392	requirements of sections to initiate and replace.
393	
394	(5) THE DEDICATED RESEARCH MRI UNIT APPROVED UNDER THIS SECTION MAY NOT
395	UTILIZE MRI ADJUSTED PROCEDURES PERFORMED ON THE DEDICATED MRI UNIT TO
396	DEMONSTRATE NEED OR TO SATISFY MRI CON REVIEW STANDARDS REQUIREMENTS.
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398	Section 8. Requirements to establish a dedicated pediatric MRI unit
399	
400	Sec. 8. An applicant proposing to establish dedicated pediatric MRI shall demonstrate all of the
401	following:
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403	(1) The applicant shall have experienced at least 7,000 pediatric (< 18 years old) discharges
404	(excluding normal newborns) in the most recent year of operation.
405	
406	(2) The applicant shall have performed at least 5,000 pediatric (< 18 years old) surgeries in the
407	most recent year of operation.
408	
409	(3) The applicant shall have an active medical staff that includes, but is not limited to, physicians
410	who are fellowship-trained in the following pediatric specialties:
411	(a) pediatric radiology (at least two)
412	(b) pediatric anesthesiology
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413	. ,	pediatric cardiology				
414	(d)					
415	(e)	pediatric gastroenterology				
416	(f)	pediatric hematology/oncology				
417	(g)	pediatric neurology				
418	(h)	pediatric neurosurgery				
419	(i)	pediatric orthopedic surgery				
420	(j)	pediatric pathology				
421	(k)	pediatric pulmonology				
422	(I)	pediatric surgery				
423	(m)	neonatology				
424	()					
425	(4)	The applicant shall have in operation the following pediatric specialty programs:				
426	(a)	pediatric bone marrow transplant program				
427		established pediatric sedation program				
428	(C)	pediatric open heart program				
429	(0)	pediatrie open rieart program				
430	(5)	An applicant meeting the requirements of this section shall be exempt from meeting the				
431	• • •	ents of Section 5 of these standards.				
432	requirem					
	Section	0. Dequirements for all applicants proposing to initiate, replace, or acquire a begnital				
433	based IN	9. Requirements for all applicants proposing to initiate, replace, or acquire a hospital				
434	Daseu III	IRI				
435	500	0 An applicant propaging to initiate, replace, or acquire a begnital based IMPI convice shall				
436		9. An applicant proposing to initiate, replace, or acquire a hospital based IMRI service shall				
437	demonst	rate each of the following, as applicable to the proposed project.				
438	(1)	The proposed site is a licensed bespital under Dart 215 of the Code				
439	(1)	The proposed site is a licensed hospital under Part 215 of the Code.				
440	(2)	The proposed site has an existing fixed MDI carries that has been exerctional for the province				
441		The proposed site has an existing fixed MRI service that has been operational for the previous				
442	36 conse	cutive months and is meeting its minimum volume requirements.				
443	(0)	The supervised site has an existing and encoding a supervised service and is presented its minimum.				
444	• •	The proposed site has an existing and operational surgical service and is meeting its minimum				
445	volume re	equirements pursuant to the CON Review Standards for Surgical Services.				
446	(4)	The second second is a decision of the failer line				
447	(4)	The applicant has achieved one of the following:				
448	(a)	at least 1,500 oncology discharges in the most recent year of operation; or				
449	(b)	at least 1,000 neurological surgeries in the most recent year of operation; or				
450		at least 7,000 pediatric (<18 years old) discharges (excluding normal newborns) and at least				
451	5,000 pe	diatric (<18 years old) surgeries in the most recent year of operation.				
452						
453		The proposed IMRI unit must be located in an operating room or a room adjoining an operating				
454	room allo	wing for transfer of the patient between the operating room and this adjoining room.				
455						
456		Non-surgical diagnostic studies shall not be performed on an IMRI unit approved under this				
457		nless the patient meets one of the following criteria:				
458		the patient has been admitted to an inpatient unit; or				
459		the patient is having the study performed on an outpatient basis, but is in need of general				
460	anesthes	ia or deep sedation as defined by the American Society of Anesthesiologists.				
461						
462	(7)	The approved IMRI unit will not be subject to MRI volume requirements.				
463						

464 (8) The applicant shall not utilize the procedures performed on the IMRI unit to demonstrate need or to satisfy MRI CON review standards requirements. 465 466 467 Section 10. Requirements for all applicants proposing to initiate, replace, or acquire a hospital based MRI-guided EPI service 468 469 Sec. 10. An applicant proposing to initiate, replace, or acquire a hospital based MRI-guided EPI 470 service shall demonstrate each of the following, as applicable to the proposed project. 471 472 (1) The proposed site is a licensed hospital under part 215 of the Code. 473 474 (2) The proposed site has an existing fixed MRI service that has been operational for the previous 475 36 consecutive months and is meeting its minimum volume requirements. 476 477 478 (3) The proposed site has an existing and operational therapeutic cardiac catheterization service 479 and is meeting its minimum volume requirements pursuant to the CON review standards for cardiac catheterization services and open heart surgery services. 480 481 (4) The proposed MRI-guided EPI unit must be located in a cardiac catheterization lab containing a 482 483 flouroscopy unit with an adjoining room containing an MRI scanner. The rooms shall contain a patient 484 transfer system allowing for transfer of the patient between the cardiac catheterization lab and the MRI unit, utilizing one of the following: 485 (a) moving the patient to the MRI scanner, or 486 (b) installing the MRI scanner on a sliding gantry to allow the patient to remain stationary. 487 488 489 (5) Non-cardiac MRI diagnostic studies shall not be performed in an MRI-guided EPI unit approved under this section unless the patient meets one of the following criteria: 490 (a) The patient has been admitted to an inpatient unit; or 491 (b) The patient is having the study performed on an outpatient basis as follows: 492 (i) is in need of general anesthesia or deep sedation as defined by the American Society of 493 494 Anesthesiologists, or (ii) has an implantable cardiac device. 495 496 (6) The approved MRI-guided EPI unit shall not be subject to MRI volume requirements. 497 498 (7) The applicant shall not utilize the procedures performed on the MRI-guided EPI unit to 499 demonstrate need or to satisfy MRI CON review standards requirements. 500 501 Section 11. Requirements for all applicants proposing to initiate, replace, or acquire an MRI 502 simulator that will not be used solely for MRT treatment planning purposes 503 504 505 Sec. 11. MRI simulation is the use of MRI to help simulate (or plan) a patient's MRT treatment and to incorporate superior delineation of soft tissues for MRT treatment plans. An applicant proposing to 506 initiate, replace, or acquire an MRI simulator shall demonstrate each of the following, as applicable to the 507 proposed project. 508 509 (1) The proposed site has an existing fixed MRI service that has been operational for the previous 510 511 36 consecutive months and is meeting its minimum volume requirements. 512 (2) The proposed site has an existing and operational MRT service and is meeting its minimum 513 514 volume requirements pursuant to the CON review standards for MRT services/units. 515

- 516 (3) MRI diagnostic studies shall not be performed using an MRI simulator approved under this 517 section unless the patient meets one of the following criteria:
- 518 (a) The patient has been admitted to an inpatient unit; or
- (B) The patient is having the study performed on an outpatient basis, but is in need of general
 anesthesia or deep sedation as defined by the American Society of Anesthesiologists.
 - (4) The approved MRI simulator will not be subject to MRI volume requirements.
- 524 (5) The applicant shall not utilize the procedures performed on the MRI simulator to demonstrate 525 need or to satisfy MRI CON review standards requirements.
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528 Section 12. Requirements for approval of an FDA-approved PET/MRI scanner hybrid for initiation, expansion, replacement, and acquisition 529

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Sec. 12. An applicant proposing to initiate, expand, replace, or acquire an FDA-approved PET/MRI scanner hybrid shall demonstrate that it meets all of the following: 532

533 (1) There is an approved PET CON for the FDA-approved PET/MRI hybrid, and the FDA-approved 534 PET/MRI scanner hybrid is in compliance with all applicable project delivery requirements as set forth in 535 the CON review standards for PET. 536

(2) The applicant agrees to operate the FDA-approved PET/MRI scanner hybrid in accordance with all applicable project delivery requirements set forth in Section 14 of these standards.

(3) The approved FDA-approved PET/MRI scanner hybrid shall not be subject to MRI volume 541 requirements. 542

(4) An FDA-approved PET/MRI scanner hybrid approved under the CON review standards for PET 544 scanner services and the review standards for MRI scanner services may not utilize MRI procedures 545 performed on an FDA-approved PET/MRI scanner hybrid to demonstrate need or to satisfy MRI CON 546 547 review standards requirements.

Section 13. Requirements for all applicants 549

Sec. 13. An applicant shall provide verification of Medicaid participation. An applicant that is a new 551 provider not currently enrolled in Medicaid shall certify that proof of Medicaid participation will be provided 552 553 to the Department within six (6) months from the offering of services if a CON is approved.

Section 14. Project delivery requirements – terms of approval 555

Sec. 14. An applicant shall agree that, if approved, MRI services, whether fixed or mobile, shall be 557 558 delivered and maintained in compliance with the following:

(1) Compliance with these standards.

(2) Compliance with the following quality assurance standards:

- (a) An applicant shall develop and maintain policies and procedures that establish protocols for 563 assuring the effectiveness of operation and the safety of the general public, patients, and staff in the MRI 564 565 service.
 - (b) An applicant shall establish a schedule for preventive maintenance for the MRI unit.
- (c) An applicant shall provide documentation identifying the specific individuals that form the MRI 567 team. At a minimum, the MRI team shall consist of the following professionals: 568
- 569 (i) Physicians who shall be responsible for screening of patients to assure appropriate utilization of the MRI service and taking and interpretation of scans. At least one of these physicians shall be a 570 board-certified radiologist. 571
 - (ii) An appropriately trained MRI technician who shall be responsible for taking an MRI scan.
- 573 (iii) An MRI physicist/engineer available as a team member on a full-time, part-time, or contractual basis. 574
- 575 (d) An applicant shall document that the MRI team members have the following qualifications:
 - (i) Each physician credentialed to interpret MRI scans meets the requirements of each of the following:

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(A) The physician is licensed to practice medicine in the State of Michigan.

(B) The physician has had at least 60 hours of training in MRI physics, MRI safety, and MRI
 instrumentation in a program that is part of an imaging program accredited by the Accreditation Council
 for Graduate Medical Education or the American Osteopathic Association, and the physician meets the
 requirements of subdivision (1), (2), or (3):

(1) Board certification by the American Board of Radiology, the American Osteopathic Board of
 Radiology, or the Royal College of Physicians and Surgeons of Canada. If the diagnostic radiology
 program completed by a physician in order to become board certified did not include at least two months
 of MRI training, that physician shall document that he or she has had the equivalent of two months of
 postgraduate training in clinical MRI imaging at an institution which has a radiology program accredited
 by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association.

(2) Formal training by an imaging program(s), accredited by the Accreditation Council for Graduate
 Medical Education or the American Osteopathic Association that included two years of training in cross sectional imaging and six months training in organ-specific imaging areas.

(3) A practice in which at least one-third of total professional time, based on a full-time clinical
 practice during the most recent 5-year period, has been the primary interpretation of MR imaging.

(C) The physician has completed and will complete a minimum of 40 hours every two years of
 Category in Continuing Medical Education credits in topics directly involving MR imaging.

596 (D) The physician complies with the "American College of Radiology (ACR) Practice Guideline for 597 Performing and Interpreting Magnetic Resonance Imaging (MRI)."

(ii) An MRI technologist who is registered by the American Registry of Radiologic Technicians or
by the American Registry of Magnetic Resonance Imaging Technologists (ARMRIT) and has, or will have
within 36 months of the effective date of these standards or the date a technologist is employed by an
MRI service, whichever is later, special certification in MRI. If a technologist does not have special
certification in MRI within either of the 3-year periods of time, all continuing education requirements shall
be in the area of MRI services.

(iii) An applicant shall document that an MRI physicist/engineer is appropriately qualified. For
 purposes of evaluating this subdivision, the Department shall consider it <u>prima facie</u> evidence as to the
 qualifications of the physicist/engineer if the physicist/engineer is certified as a medical physicist by the
 American Board of Radiology, the American Board of Medical Physics, or the American Board of Science
 in Nuclear Medicine. However, the applicant may submit and the Department may accept other evidence
 that an MRI physicist/engineer is qualified appropriately.

(e) The applicant shall have, within the MRI unit/service, equipment and supplies to handle clinical
 emergencies that might occur in the unit. MRI service staff will be trained in CPR and other appropriate
 emergency interventions. A physician shall be on-site, in, or immediately available to the MRI unit at all
 times when patients are undergoing scans.

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(3) Compliance with the following access to care requirements:

The applicant, to assure that the MRI unit will be utilized by all segments of the Michigan population, shall (a) provide MRI services to all individuals based on the clinical indications of need for the service

and not on ability to pay or source of payment.

(b) maintain information by source of payment to indicate the volume of care from each source provided annually.

621 (c) An applicant shall participate in Medicaid at least 12 consecutive months within the first two 622 years of operation and continue to participate annually thereafter.

(d) The operation of and referral of patients to the MRI unit shall be in conformance with 1978 PA
368, Sec. 16221, as amended by 1986 PA 319; MCL 333.16221; MSA 14.15 (16221).

(4) Compliance with the following monitoring and reporting requirements:

627 (a) MRI units shall be operating at a minimum average annual utilization during the second 12 628 months of operation, and annually thereafter, as applicable:

629 (i) 6,000 MRI adjusted procedures per unit for fixed MRI services unless compliant with (<u>4A) or</u> 630 (<u>2B</u>),

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- 631 (A) 4,000 MRI adjusted procedures for the fixed MRI unit initiated pursuant to Section 3(2)(b)(ii) and is the only fixed MRI unit at the current site, 632 (B) 3,000 MRI adjusted procedures for the fixed MRI unit initiated pursuant to Section 3(2)(b)(iii) 633
- 634 and is the only fixed MRI unit at the hospital site licensed under part 215 of the code, (ii) 5,500 MRI adjusted procedures per unit for mobile MRI services.
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(iii) 3,500 MRI adjusted procedures per unit for dedicated pediatric MRI units.

(iv) Each mobile host site in a rural or micropolitan statistical area county shall have provided at 637 least a total of 400 adjusted procedures during its second 12 months of operation, and annually 638 thereafter, from all mobile units providing services to the site. Each mobile host site not in a rural or 639 640 micropolitan statistical area county shall have provided at least a total of 600 adjusted procedures during 641 its second 12 months of operation and annually thereafter, from all mobile units providing services to the 642 site.

- (v) In meeting these requirements, an applicant shall not include any MRI adjusted procedures 643 performed on an MRI unit used exclusively for research and approved pursuant to Section 7 or for an 644 IMRI unit approved pursuant to Section 9. 645
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647 (b) The applicant shall participate in a data collection network established and administered by the Department or its designee. The data may include, but is not limited to, operating schedules, 648 demographic and diagnostic information, and the volume of care provided to patients from all payor 649 sources, as well as other data requested by the Department or its designee and approved by the 650 651 Commission. The applicant shall provide the required data in a format established by the Department and in a mutually agreed upon media no later than 30 days following the last day of the guarter for which 652 data are being reported to the Department. An applicant shall be considered in violation of this term of 653 approval if the required data are not submitted to the Department within 30 days following the last day of 654 the quarter for which data are being reported. The Department may elect to verify the data through 655 656 on-site review of appropriate records. Data for an MRI unit approved pursuant to Section 7, Section 8, Section 9, Section 10, or Section 11 shall be reported separately. 657

For purposes of Section 9, the data reported shall include, at a minimum, how often the IMRI unit is used 658 and for what type of services, i.e., intra-operative or diagnostic. For purposes of Section 10, the data 659 reported shall include, at a minimum, how often the MRI-guided EPI unit is used and for what type of 660 661 services, i.e., electrophysiology or diagnostic. For purposes of Section 11, the data reported shall 662 include, at a minimum, how often the MRI simulator is used and for what type of services, i.e., treatment plans or diagnostic services. 663

(c) The applicant shall provide the Department with a notice stating the first date on which the MRI 664 unit became operational, and such notice shall be submitted to the Department consistent with applicable 665 statute and promulgated rules. 666

667 (d) An applicant who is a central service coordinator shall notify the Department of any additions, 668 deletions, or changes in the host sites of each approved mobile MRI unit within 10 days after the 669 change(s) in host sites is made.

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(5) An applicant for an MRI unit approved under Section 7 shall agree that the services provided by the MRI unit are delivered in compliance with the following terms. 672

- (a) The capital and operating costs relating to the research use of the MRI unit shall be charged 673 only to a specific research account(s) and not to any patient or third-party payor. 674
- (b) The MRI unit shall not be used for any purposes other than as approved by the IRB unless the 675 676 applicant has obtained CON approval for the MRI unit pursuant to Part 222 and these standards, other than Section 7. 677
- 678 (c) The dedicated research MRI unit will be used primarily (70% or more of the procedures) for 679 research purposes only.
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684 (7) The agreements and assurances required by this section shall be in the form of a certification agreed to by the applicant or its authorized agent. 685 686 Section 15. MRI procedure adjustments 687 688 689 Sec. 15. (1) The Department shall apply the following formula, as applicable, to determine the number of MRI adjusted procedures that are performed by an existing MRI service or unit: 690 691 (a) The base value for each MRI procedure is 1.0. For functional MRI (fMRI) procedures, MRIguided interventions, and cardiac MRI procedures, the base value is 2.0. 692 (i) fMRI means brain activation studies. 693 (ii) MRI-guided interventions means any invasive procedure performed requiring MRI guidance 694 performed in the MRI scanner. 695 696 (iii) Cardiac MRI Procedure means dedicated MRI performed of the heart done for the sole purpose of evaluation of cardiac function, physiology, or viability. 697 (b) For each MRI visit involving a pediatric patient, 0.25 shall be added to the base value. 698 (c) For each MRI visit involving an inpatient, 0.50 shall be added to the base value. 699 (d) For each MRI procedure performed on a sedated patient, 0.75 shall be added to the base 700 701 value. (e) For each MRI procedure performed on a re-sedated patient, 0.25 shall be added to the base 702 703 value. (f) For each MRI procedure performed on a special needs patient, 0.25 shall be added to the base 704 705 value. 706 (g) For each MRI visit that involves both a clinical and research scan on a single patient in a single visit, 0.25 shall be added to the base value. 707 708 (h) For each contrast MRI procedure performed after use of a contrast agent, and not involving a procedure before use of a contrast agent, 0.35 shall be added to the base value. 709 (i) For each contrast MRI procedure involving a procedure before and after use of a contrast 710 711 agent. 1.0 shall be added to the base value. (i) For each MRI procedure performed at a teaching facility, 0.15 shall be added to the base value. 712 (k) The results of subsections (a) through (j) shall be summed, and that sum shall represent an 713 MRI adjusted procedure. 714 715 (2) The Department shall apply not more than one of the adjustment factors set forth in this 716 717 subsection, as applicable, to the number of MRI procedures adjusted in accordance with the applicable provisions of subsection (1) that are performed by an existing MRI service or unit. 718 (a) For a site located in a rural or micropolitan statistical area county, the number of MRI adjusted 719 procedures shall be multiplied by a factor of 1.4. 720 721 (b) For a mobile MRI unit that serves hospitals and other host sites located in rural, micropolitan 722 statistical area, and metropolitan statistical area counties, the number of MRI adjusted procedures for a site located in a rural or micropolitan statistical area county, shall be multiplied by a factor of 1.4 and for a 723 site located in a metropolitan statistical area county, the number of MRI adjusted procedures shall be 724 multiplied by a factor of 1.0. 725 726 (c) For a mobile MRI unit that serves only sites located in rural or micropolitan statistical area counties, the number of MRI adjusted procedures shall be multiplied by a factor of 2.0. 727 728 (d) For a mobile MRI unit that serves only sites located in a health service area with one or fewer fixed MRI units and one or fewer mobile MRI units, the number of MRI adjusted procedures shall be 729 multiplied by a factor of 3.5. 730 731 (e) Subsection (2) shall not apply to an application proposing a subsequent fixed MRI unit (second, third, etc.) at the same site. 732 CON Review Standards for MRI Services CON-213 For MRI Workgroup Meeting on 8/13/15

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(6) The dedicated pediatric MRI unit approved under Section 8 shall include at least 80% of the

MRI procedures that are performed on patients under 18 years of age.

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(3) The number of MRI adjusted procedures performed by an existing MRI service is the sum ofthe results of subsections (1) and (2).

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737 Section 16. Documentation of actual utilization

Sec. 16. Documentation of the number of MRI procedures performed by an MRI unit shall be
substantiated by the Department utilizing data submitted by the applicant in a format and media specified
by the Department and as verified for the 12-month period reported on the most recently published "MRI
Service Utilization List" as of the date an application is deemed submitted by the Department. The
number of MRI procedures actually performed shall be documented by procedure records and not by
application of the methodology required in Section 17. The Department may elect to verify the data
through on-site review of appropriate records.

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Section 17. Methodology for computing the number of available MRI adjusted procedures

Sec. 17. (1) The number of available MRI adjusted procedures required pursuant to Section 3 shall be computed in accordance with the methodology set forth in this section. In applying the methodology, the following steps shall be taken in sequence, and data for the 12-month period reported on the most recently published "Available MRI Adjusted Procedures List," as of the date an application is deemed submitted by the Department, shall be used:

(a) Identify the number of actual MRI adjusted procedures performed by each existing MRI serviceas determined pursuant to Section 15.

(i) For purposes of computing actual MRI adjusted procedures, MRI adjusted procedures
 performed on MRI units used exclusively for research and approved pursuant to Section 7 and dedicated
 pediatric MRI approved pursuant to Section 8 shall be excluded.

(ii) For purposes of computing actual MRI adjusted procedures, 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.

(iii) For purposes of computing actual MRI adjusted procedures, 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.

(b) Identify the number of available MRI adjusted procedures, if any, for each existing MRI service
 as determined pursuant to Section 2(1)(c).

(c) Determine the number of available MRI adjusted procedures that each referring doctor may
 commit from each service to an application in accordance with the following:

(i) Divide the number of available MRI adjusted procedures identified in subsection (b) for each
 service by the number of actual MRI adjusted procedures identified in subsection (a) for that existing MRI
 service.

(ii) For each doctor referring to that existing service, multiply the number of actual MRI adjusted
 procedures that the referring doctor made to the existing MRI service by the applicable proportion
 obtained by the calculation in subdivision (c)(i).

(A) For each doctor, subtract any available adjusted procedures previously committed. The totalfor each doctor cannot be less than zero.

(B) The total number of available adjusted procedures for that service shall be the sum of theresults of (A) above.

(iii) For each MRI service, the available MRI adjusted procedures resulting from the calculation in
 (c)(ii) above shall be sorted in descending order by the available MRI adjusted procedures for each

doctor. Then any duplicate values shall be sorted in descending order by the doctors' license numbers
(last 6 digits only).
(iv) Using the data produced in (c)(iii) above, sum the number of available adjusted procedures in
descending order until the summation equals at least 75 percent of the total available adjusted
procedures. This summation chall include the minimum number of destars processors to reach the 75.

procedures. This summation shall include the minimum number of doctors necessary to reach the 75
 percent level.

- (v) For the doctors representing 75 percent of the total available adjusted procedures in (c)(iv)
 above, sum the available adjusted procedures.
- (vi) For the doctors used in subsection (c)(v) above, divide the total number of available adjusted
 procedures identified in (c)(ii)(B) above by the sum of those available adjusted procedures produced in
 (c)(v) above.
- (vii) For only those doctors identified in (c)(v) above, multiply the result of (c)(vi) above by the
 available adjusted procedures calculated in (c)(ii)(A) above.
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(viii) The result shall be the "Available MRI Adjusted Procedures List."

(2) After publication of the "Available MRI Adjusted Procedures List" resulting from (1) above, the
 data shall be updated to account for a) doctor commitments of available MRI adjusted procedures in
 subsequent MRI CON applications and b) MRI adjusted procedures used in subsequent MRI CON
 applications received in which applicants apply for fixed MRI services pursuant to Section 3(2).

803 Section 18. Procedures and requirements for commitments of available MRI adjusted procedures 804

Sec. 18. (1) If one or more host sites on a mobile MRI service are located within the planning area of
 the proposed site, the applicant may access available MRI adjusted procedures from the entire mobile
 MRI service.

(2)(a) At the time the application is submitted to the Department, the applicant shall submit a signed
 data commitment on a form provided by the Department in response to the applicant's letter of intent for
 each doctor committing available MRI adjusted procedures to that application for a new MRI unit that
 requires doctor commitments.

(b) An applicant also shall submit, at the time the application is submitted to the Department, a
 computer file that lists, for each MRI service from which data are being committed to the same
 application, the name and license number of each doctor for whom a signed and dated data commitment
 form is submitted.

(i) The computer file shall be provided to the Department on mutually agreed upon media and in a
 format prescribed by the Department.

(ii) If the doctor commitments submitted on the Departmental forms do not agree with the data on
 the computer file, the applicant shall be allowed to correct only the computer file data which includes
 adding physician commitments that were submitted at the time of application.

(c) If the required documentation for the doctor commitments submitted under this subsection is
 not submitted with the application on the designated application date, the application will be deemed
 submitted on the first applicable designated application date after all required documentation is received
 by the Department.

(3) The Department shall consider a signed and dated data commitment on a form provided by the
 Department in response to the applicant's letter of intent that meets the requirements of each of the
 following, as applicable:

(a) A committing doctor certifies that 100% of his or her available MRI adjusted procedures for
each specified MRI service, calculated pursuant to Section 17, is being committed and specifies the CON
application number for the MRI unit to which the data commitment is made. A doctor shall not be
required to commit available MRI adjusted procedures from all MRI services to which his or her patients

are referred for MRI services but only from those MRI services specified by the doctor in the data commitment form provided by the Department and submitted by the applicant in support of its application.

(b) A committing doctor certifies ownership interest, either direct or indirect, in the applicant entity.
Indirect ownership includes ownership in an entity that has ownership interest in the applicant entity. This
requirement shall not apply if the applicant entity is a group practice of which the committing doctor is a
member. Group practice means a group practice as defined pursuant to the provisions of 42 U.S.C.
1395nn (h)(4), commonly known as Stark II, and the Code of Federal Regulations, 42 CFR, Part 411,
published in the Federal Register on August 14, 1995, or its replacement.

(c) A committing doctor certifies that he or she has not been provided, or received a promise of
 being provided, a financial incentive to commit any of his or her available MRI adjusted procedures to the
 application.

(4)(a) The Department shall not consider a data commitment from a doctor for available MRI adjusted
procedures from a specific MRI service if the available MRI adjusted procedures from that specific MRI
service were used to support approval of an application for a new or additional MRI unit, pursuant to
Section 3, for which a final decision to approve has been issued by the Director of the Department until
either of the following occurs:

(i) The approved CON is withdrawn or expires.

(ii) The MRI service or unit to which the data were committed has been in operation for at least 36 continuous months.

(b) The Department shall not consider a data commitment from a doctor for available MRI adjusted
 procedures from a specific MRI service if the available MRI adjusted procedures from that specific MRI
 service were used to support an application for a new fixed or mobile MRI unit or additional mobile MRI
 unit pursuant to Section 3, for which a final decision to disapprove was issued by the Director of the
 Department until either of the following occurs:

859 (i) A final decision to disapprove an application is issued by the Director, and the applicant does 860 not appeal that disapproval or

861 (ii) If an appeal was made, either that appeal is withdrawn by the applicant or the committing 862 doctor withdraws his or her data commitment pursuant to the requirements of subsection (8).

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(5) The Department shall not consider a data commitment from a committing doctor for available
MRI adjusted procedures from the same MRI service if that doctor has submitted a signed data
commitment, on a form provided by Department, for more than one (1) application for which a final
decision has not been issued by the Department. If the Department determines that a doctor has
submitted a signed data commitment for the same available MRI adjusted procedures from the same MRI
service to more than one CON application pending a final decision for a new fixed or mobile MRI unit or
additional mobile MRI unit pursuant to Section 3, the Department shall,

(a) if the applications were submitted on the same designated application date, notify all
applicants, simultaneously and in writing, that one or more doctors have submitted data commitments for
available MRI adjusted procedures from the same MRI service and that the doctors' data from the same
MRI service shall not be considered in the review of any of the pending applications submitted on the
same designated application date until the doctor notifies the Department, in writing, of the one (1)
application for which the data commitment shall be considered.

(b) if the applications were submitted on different designated application dates, consider the data
commitment in the application submitted on the earliest designated application date and shall notify,
simultaneously in writing, all applicants of applications submitted on designated application dates
subsequent to the earliest date that one or more committing doctors have submitted data commitments
for available MRI adjusted procedures from the same MRI service and that the doctors' data shall not be
considered in the review of the application(s) submitted on the subsequent designated application
date(s).

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CON Review Standards for MRI Services For MRI Workgroup Meeting on 8/13/15 Department's edits are highlighted Workgroup's edits are highlighted

885 (6) The Department shall not consider any data commitment submitted by an applicant after the date an application is deemed submitted unless an applicant is notified by the Department, pursuant to 886 subsection (5), that one or more committing doctors submitted data commitments for available MRI 887 adjusted procedures from the same MRI service. If an applicant is notified that one or more doctors' data 888 commitments will not be considered by the Department, the Department shall consider data commitments 889 890 submitted after the date an application is deemed submitted only to the extent necessary to replace the data commitments not being considered pursuant to subsection (5). 891 (a) The applicant shall have 30 days to submit replacement of doctor commitments as identified by 892 893 the Department in this Section. 894 (7) In accordance with either of the following, tThe Department shall not consider a withdrawal of a 895 896 signed data commitment: (a) on or after the date an application is deemed submitted by the Department. 897 (b) after a proposed decision to approve an application has been issued by the Department. 898 899 900 (8) The Department shall consider a withdrawal of a signed data commitment if a committing 901 doctor submits a written notice to the Department, that specifies the CON application number and the specific MRI services for which a data commitment is being withdrawn, and if an applicant demonstrates 902 that the requirements of subsection (7) also have been met. 903 904 905 Section 19. Lists published by the Department 906 Sec. 19. (1) On or before May 1 and November 1 of each year, the Department shall publish the 907 908 following lists: 909 (a) A list, known as the "MRI Service Utilization List," of all MRI services in Michigan that includes 910 at least the following for each MRI service: (i) The number of actual MRI adjusted procedures; 911 (ii) The number of available MRI adjusted procedures, if any; and 912 (iii) The number of MRI units, including whether each unit is a clinical, research, or dedicated 913 914 pediatric. 915 (b) A list, known as the "Available MRI Adjusted Procedures List," that identifies each MRI service that has available MRI adjusted procedures and includes at least the following: 916 (i) The number of available MRI adjusted procedures; 917 (ii) The name, address, and license number of each referring doctor, identified in Section 918 17(1)(c)(v), whose patients received MRI services at that MRI service; and 919 (iii) The number of available MRI adjusted procedures performed on patients referred by each 920 921 referring doctor, identified in Section 17(1)(c)(v), and if any are committed to an MRI service. This number shall be calculated in accordance with the requirements of Section 17(1). A referring doctor may 922 923 have fractional portions of available MRI adjusted procedures. (c) For the lists published pursuant to subsections (a) or (b), the May 1 list will report 12 months of 924 925 data from the previous January 1 through December 31 reporting period, and the November 1 list will report 12 months of data from the previous July 1 through June 30 reporting period. Copies of both lists 926 shall be available upon request. 927 (d) The Department shall not be required to publish a list that sorts MRI database information by 928 929 referring doctor, only by MRI service. 930 (2) When an MRI service begins to operate at a site at which MRI services previously were not 931 provided, the Department shall include in the MRI database, data beginning with the second full quarter 932 of operation of the new MRI service. Data from the start-up date to the start of the first full guarter will not 933 934 be collected to allow a new MRI service sufficient time to develop its data reporting capability. Data from

- the first full quarter of operation will be submitted as test data but will not be reported in the lists publishedpursuant to this section.
- 937
 938 (3) In publishing the lists pursuant to subsections (a) and (b), if an MRI service has not reported
 939 data in compliance with the requirements of Section 14, the Department shall indicate on both lists that
 940 the MRI service is in violation of the requirements set forth in Section 14, and no data will be shown for
 941 that service on either list.

943 Section 20. Effect on prior CON Review Standards; Comparative reviews

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Sec. 20. (1) These CON review standards supersede and replace the CON Review Standards for
 MRI Services approved by the CON Commission on June 13, 2013 September 25, 2014 and effective
 September 18, 2013 December 22, 2014.

- (2) Projects reviewed under these standards shall not be subject to comparative review.
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Section 21. Health Service Areas

Sec. 21. Counties assigned to each of the health service areas are as follows:

956 957 958	HSA		COUNTIES	
959 959 960 961 962	1	Livingston Macomb Wayne	Monroe Oakland	St. Clair Washtenaw
963 964 965	2	Clinton Eaton	Hillsdale Ingham	Jackson Lenawee
966 967 968 969	3	Barry Berrien Branch	Calhoun Cass Kalamazoo	St. Joseph Van Buren
970 971 972 973 974	4	Allegan Ionia Kent Lake	Mason Mecosta Montcalm Muskegon	Newaygo Oceana Osceola Ottawa
975 976	5	Genesee	Lapeer	Shiawassee
977 978 979 980 981 982	6	Arenac Bay Clare Gladwin Gratiot	Huron Iosco Isabella Midland Ogemaw	Roscommon Saginaw Sanilac Tuscola
983 984 985 986 987 988 988	7	Alcona Alpena Antrim Benzie Charlevoix Cheboygan	Crawford Emmet Gd Traverse Kalkaska Leelanau Manistee	Missaukee Montmorency Oscoda Otsego Presque Isle Wexford
990 991 992 993 994	8	Alger Baraga Chippewa Delta Dickinson	Gogebic Houghton Iron Keweenaw Luce	Mackinac Marquette Menominee Ontonagon Schoolcraft

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996						
997	Rural Michigan counties are as	s follows:				
998						
999	Alcona	Gogebic	Ogemaw			
1000	Alger	Huron	Ontonagon			
1001	Antrim	losco	Osceola			
1002	Arenac	Iron	Oscoda			
1003	Baraga	Lake	Otsego			
1004	Charlevoix	Luce	Presque Isle			
1005	Cheboygan	Mackinac	Roscommon			
1006	Clare	Manistee	Sanilac			
1007	Crawford	Montmorency	Schoolcraft			
1008	Emmet	Newaygo	Tuscola			
1009	Gladwin	Oceana				
1010						
1011	Micropolitan statistical area Michigan counties are as follows:					
1012	•	C .				
1013	Allegan	Hillsdale	Mason			
1014	Alpena	Houghton	Mecosta			
1015	Benzie	Ionia	Menominee			
1016	Branch	Isabella	Missaukee			
1017	Chippewa	Kalkaska	St. Joseph			
1018	Delta	Keweenaw	Shiawassee			
1019	Dickinson	Leelanau	Wexford			
1020	Grand Traverse	Lenawee				
1021	Gratiot	Marquette				
1022		•				
1023	Metropolitan statistical area Mi	chigan counties are as follows	:			
1024	·	0				
1025	Barry	Jackson	Muskegon			
1026	Bay	Kalamazoo	Oakland			
1027	Berrien	Kent	Ottawa			
1028	Calhoun	Lapeer	Saginaw			
1029	Cass	Livingston	St. Clair			
1030	Clinton	Macomb	Van Buren			
1031	Eaton	Midland	Washtenaw			
1032	Genesee	Monroe	Wayne			
1033	Ingham	Montcalm				
1034	5					
1035	Source:					
1036						
1037	75 F.R., p. 37245 (June 28, 20	10)				
1038	Statistical Policy Office	- /				
1039	Office of Information and Regu	latory Affairs				
1040	United States Office of Manage					
1041						

APPENDIX A