MRI Service Utilization List, November 1, 2021

HOSPITAL-BASED FACILITIES

Reporting Period July 1, 2020 through June 30, 2021

Service ID	BHS ID	Service Name	No. of Clinical Units [1]	No. of Visits	No. of AP [2]		No. of AAP
090265	630070	Ascension Crittenton Hospital	1	5,145	8,399		398
190043	250072	Ascension Genesys Hospital	1	1,818	3,000	[3,8]	0
910230	830420	Ascension St. John Hospital	1	6,118	13,423		4,927
650162	820120	Beaumont Hospital - Dearborn	1	5,760	9,823	[9]	1,552
100351	630050	Beaumont Hospital - Farmington	1	6,537	12,869		3,365
080102	820030	Beaumont Hospital - Grosse Pointe	1	6,218	11,960		2,471
650163	630030	Beaumont Hospital - Royal Oak	7	25,755	61,435		4,302
150116	820250	Beaumont Hospital - Taylor	1	6,450	10,523		2,147
130078	820170	Beaumont Hospital - Trenton	1	6,710	10,753		2,334
960174	630160	Beaumont Hospital - Troy	3	15,526	31,484		4,620
060133	820010	Beaumont Hospital - Wayne	1	5,129	9,290		799
010028	130031	Bronson Battle Creek Hospital	1	4,981	8,249		249
990024	390020	Bronson Methodist Hospital	2	8,978	15,710		0
930088	830080	Children's Hospital of MI	1	2,926	9,519		490
030082	830080	Children's Hospital of MI - Ded Ped	1	2,023	4,481	[7]	0
050222	170020	Chippewa County War Mem Hosp	1	3,456	6,465	[6]	0
050340	120010	Community Health Ctr-Branch Co	1	2,164	4,052	[6]	0
070239	730020	Covenant Medical Center - Cooper	2	11,417	26,483	[5]	2,483
020360	220020	Dickinson County Memorial Hosp	1	2,429	7,130	[6]	0
880223	330060	Edward W. Sparrow Hospital	2	10,217	19,793	[5,10]	0
040442	460020	Emma L Bixby Med Ctr	1	2,742	5,480	[6]	0
030343	820070	Garden City Hospital	1	1,697	3,079		0
840266	830220	Harper University Hospital	3	8,623	17,554		0
030189	380010	Henry Ford Allegiance Health	1	7,130	12,025		3,343
650161	830190	Henry Ford Hospital	4	12,842	32,566	[5]	0
090276	830190	Henry Ford Hospital IMRI	1	595	1,660	[11]	0
070207	500110	Henry Ford Macomb Hospital	1	5,780	11,140		2,617
070505	630176	Henry Ford West Bloomfield Hospital	2	11,319	24,726		8,107
040525	820230	Henry Ford Wyandotte Hospital	2	8,163	16,005		4
040223	300010	Hillsdale Community Hlth Ctr	1	2,277	4,286	[6]	0
030240	700020	Holland Community Hospital	1	6,290	10,253		2,253
100180	250040	Hurley Medical Center	1	4,645	9,104		981

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060416	630014	Huron Valley-Sinai Hospital	1	4,114	6,934		0
080445	830520	Karmanos Cancer Center	1	1,673	3,648		0
190147	110070	Lakeland Hospital-Niles [New]	1	1,522	2,584	3	0
010031	110050	Lakeland Hospital-St. Joseph	1	4,187	9,523		1,522
060213	500060	McLaren Macomb	1	5,760	12,719		3,625
180055	630120	McLaren Oakland	1	4,110	6,279		0
050315	090050	McLaren-Bay Region	1	4,794	7,760		0
040272	370010	McLaren-Central Michigan	1	2,332	4,731	6	0
860148	250050	McLaren-Flint	1	2,884	7,837		0
030472	330020	McLaren-Greater Lansing	1	4,109	7,858		0
040344	440010	McLaren-Lapeer Region	1	3,000	4,880		0
660027	240030	McLaren-Northern Michigan	2	6,454	13,997	6	0
050186	740020	McLaren-Port Huron	1	4,931	8,009		5
050183	540030	Mecosta County Medical Center	1	3,222	6,962	6	0
030414	780010	Memorial Healthcare	2	4,331	12,391	6, 5, 10	0
030017	610020	Mercy Health Muskegon	2	9,618	15,293		0
060021	410060	Metro Health Hospital	2	8,338	13,495		0
010474	040010	MidMichigan Med Ctr-Alpena	1	5,088	11,944	6	3,536
030117	290010	MidMichigan Medical Center-Gratiot	1	3,010	6,663	6	0
030036	560020	MidMichigan Medical Center-Midland	2	9,860	16,329		329
040202	840010	Munson Health Cadillac Hospital	1	3,809	8,755	6	755
040435	200020	Munson Health Grayling	1	2,416	5,597	6	0
660028	280010	Munson Medical Center	2	9,778	27,384	6	10,067
090177	130080	Oaklawn Hospital	1	2,805	4,102		0
050440	690020	Otsego Memorial Hospital	1	2,798	5,489	6	0
040480	080010	Pennock Hospital	1	3,223	4,878		0
060196	310020	Portage Health Hospital	1	1,719	3,280	6	0
040333	580030	Promedica Monroe Regional Hospital	1	4,497	7,120		0
910234	630130	Providence Hosp and Med Ctr	2	5,485	10,858		0
020422	630177	Providence Hosp-Providence Park	2	8,380	16,161		137
070516	830450	Sinai-Grace Hospital	1	4,160	7,736		0
040321	590010	Sparrow Carson Hospital	1	1,547	2,054		0
160041	700030	Spectrum Health - Zeeland	1	3,635	6,122		0
950133	410010	Spectrum Health-Blodgett Campus	2	9,224	21,564		5,236
890326	410040	Spectrum Health-Butterworth Campus	3	10,135	30,281	5	0
060466	410040	Spectrum Health-Butterworth Ded Ped	2	6,908	21,868	7	0

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100367	410040	Spectrum Health-Butterworth IMRI	1	70	219	[11]	0
140315	620010	Spectrum Health-Gerber Memorial	1	3,818	8,008		7
050071	530010	Spectrum Health-Ludington	1	2,860	6,089	[6]	0
090207	590060	Spectrum Health-United Campus	1	4,506	7,359		0
040227	210010	St. Francis Hospital	1	2,690	5,128	[6]	0
990133	500070	St. John Macomb Oakland Hosp	1	6,098	11,031		2,754
080227	810080	St. Joseph Mercy Chelsea	1	5,387	8,805		805
870341	810030	St. Joseph Mercy Hospital	3	15,860	31,117		6,479
060401	470020	St. Joseph Mercy Livingston Hosp	1	3,715	6,067		0
940181	630140	St. Joseph Mercy Oakland	2	9,781	15,930		0
030157	820190	St. Mary Mercy Hospital	1	6,436	11,503		3,189
990023	410080	St. Mary's Health Care	2	11,312	21,937		5,898
850065	730050	St. Mary's of Michigan Med Ctr	2	5,017	9,660		0
060098	350010	Tawas St. Joseph Hospital	1	2,118	3,796	[6]	0
840227	810060	U of M Health System	8	30,693	79,689	[5]	0
030121	810060	U of M Health System-Ded Ped	3	8,673	27,517	[7]	0
100353	810060	U of M Health System-IMRI	1	173	666	[11]	0
650108	520050	UP Health System - Marquette	2	5,375	13,292	[6]	0
060067	650010	West Branch Regional Med Ctr	1	2,523	5,174	[6]	0
070205	510020	West Shore Medical Center	1	1,750	3,887	[6]	0

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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 July1, 2020 through
June 30,2021 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 May 28, 2021)
    Certificate of Need Section, Michigan Department of Health and Human Services