

2013 Michigan Certificate of Need Annual Survey
Megavoltage Radiation Therapy Units, Hospitals and Freestanding Facilities
Report 080

Facility Number	Facility Name	Type	Type of Unit*								
			1	2	3	4	5	6	7	8	
47.C003	ST. JOSEPH MERCY WOODLAND HEALTH CENTE	F	0	1	0	0	0	0	0	0	0
50.0070	ST. JOHN MACOMB-OAKLAND HOSP (MACOMB)	H	0	2	0	0	0	0	0	0	0
50.0110	HENRY FORD MACOMB HOSPITAL	H	0	2	0	0	0	0	0	0	0
50.C609	MCCI MACOMB CANCER CENTER	F	0	1	0	0	0	0	0	0	0
50.C665	TED B WAHBY CANCER CENTER	F	0	1	0	0	0	0	0	0	0
50.C674	NORTH MACOMB MRT CENTER	F	0	1	0	0	0	0	0	0	0
58.2603	MIRO TROY CANCER CENTER	F	0	1	0	0	0	0	0	0	0
58.C010	KARMANOS CANCER CENTER - MONROE	F	0	1	0	0	0	0	0	0	0
63.0014	HURON VALLEY-SINAI HOSPITAL	H	0	1	0	0	0	0	0	0	0
63.0030	WILLIAM BEAUMONT HOSPITAL, ROYAL OAK	H	0	4	1	0	0	0	0	0	0
63.0160	WILLIAM BEAUMONT HOSPITAL, TROY	H	0	3	0	0	0	0	0	0	0
63.0176	HENRY FORD WEST BLOOMFIELD HOSPITAL	H	0	2	0	0	0	0	0	0	0
63.2650	MIRO PONTIAC CANCER CENTER	F	0	2	0	0	0	0	0	0	0
63.2661	MIRO FARMINGTON HILLS	F	0	1	0	0	0	0	0	0	0
63.2667	MIRO CLARKSTON	F	0	1	0	0	0	0	0	0	0
63.C005	PROVIDENCE CANCER CENTER	F	0	2	0	0	0	0	0	0	0
63.C008	MIRO MADISON HEIGHTS	F	0	1	0	0	0	0	0	0	0
63.C033	MICHIGAN RADIATION INSTITUTE,LLC	F	0	1	0	0	0	0	0	0	0
63.C686	WEISBERG CANCER TREATMENT CENTER	F	0	1	0	0	0	0	0	0	0
63.C813	BOTSFORD COMPREHENSIVE CANCER CENTER	F	0	1	0	0	0	0	0	0	0
63.C824	PROVIDENCE ASSARIAN CANCER CENTER-PROV	F	0	2	0	0	0	0	0	0	0
63.C831	CRITTENTON CANCER CENTER	F	0	1	0	0	0	0	0	0	0
63.C856	MCLAREN CANCER INSTITUTE	F	0	1	0	0	0	0	0	0	0
74.0010	ST. JOSEPH MERCY PORT HURON HOSPITAL	H	0	1	0	0	0	0	0	0	0
81.0030	ST. JOSEPH MERCY ANN ARBOR HOSPITAL	H	0	3	0	0	0	0	1	0	0
81.0060	UNIVERSITY OF MICHIGAN HOSPITALS	H	0	6	0	0	0	0	0	0	0
82.0040	HENRY FORD COTTAGE HOSPITAL	H	0	1	0	0	0	0	0	0	0
82.0120	OAKWOOD HOSPITAL - DEARBORN	H	0	2	0	0	0	0	1	0	0
82.0190	ST. MARY MERCY LIVONIA HOSPITAL	H	0	1	0	0	0	0	0	0	0
82.2623	RADIATION THERAPY ASSOCIATES, P.C.	F	0	1	0	0	0	0	0	0	0

*Type of Unit: 1=Cobalt 2=Linear Accelerator 3=Gamma Knife 4=Stereotactic Radio-Surgery 5=OR Based Linear Accelerator 6=Total Body Irradiators 7=Cyber Knife 8=High MRT.

Data from Section F of the survey.

2013 Michigan Certificate of Need Annual Survey
Megavoltage Radiation Therapy Units, Hospitals and Freestanding Facilities
Report 080

Facility Number	Facility Name	Type	Type of Unit*								
			1	2	3	4	5	6	7	8	
82.2632	OAKWOOD HEALTHCARE CENTER-SOUTHGATE	F	0	1	0	0	0	0	0	0	
82.2634	JOSEPHINE FORD CANCER CENTER - DOWNRIV	F	0	2	0	0	0	0	0	0	
82.6858	ST. JOSEPH MERCY CANTON HEALTH CENTER	F	0	1	0	0	0	0	0	0	
82.C680	VAN ELSLANDER CANCER CENTER	F	0	2	0	0	0	0	0	0	
83.0190	HENRY FORD HOSPITAL	H	0	3	0	0	0	0	0	0	
83.0450	SINAI-GRACE HOSPITAL	H	0	1	0	0	0	0	0	0	
83.0520	KARMANOS CANCER CENTER	H	0	4	1	0	0	0	0	1	
HSA 1: SOUTHEAST MICHIGAN		37 Facilities	0	63	2	0	0	0	0	2	1
33.0060	EDWARD W SPARROW HOSPITAL	H	0	3	0	0	0	0	0	0	0
33.C600	RADIATION ONCOLOGY ALLIANCE	F	0	2	0	0	0	0	0	0	0
33.C637	COMPASS CANCER CENTER	F	0	1	0	0	0	0	0	0	0
38.0010	ALLEGIANCE HEALTH	H	0	2	0	0	0	0	0	0	0
46.0020	EMMA L. BIXBY MEDICAL CENTER	H	0	1	0	0	0	0	0	0	0
HSA 2: MID-SOUTHERN		5 Facilities	0	9	0	0	0	0	0	0	0
11.0050	LAKELAND HOSPITAL, ST. JOSEPH	H	0	2	0	0	0	0	0	0	0
13.0031	BRONSON BATTLE CREEK HOSPITAL	H	0	2	0	0	0	0	0	0	0
39.2616	WEST MICHIGAN CANCER CENTER	F	0	3	0	0	0	0	0	0	0
HSA 3: SOUTHWEST		3 Facilities	0	7	0	0	0	0	0	0	0
41.0080	MERCY HEALTH SAINT MARY'S	H	0	3	0	0	0	0	0	0	0
41.C039	LEMMEN HOLTON CANCER PAVILION	F	0	4	0	0	0	0	0	0	0
41.C043	METRO HEALTH CANCER SERVICES BUILDING	F	0	1	0	0	0	0	0	0	0
61.C004	JOHNSON CENTER FOR CANCER CARE	F	0	2	0	0	0	0	0	0	0
67.0021	SPECTRUM HEALTH REED CITY HOSPITAL	H	0	1	0	0	0	0	0	0	0
67.C001	CROSSROAD RADIATION THERAPY CENTER	F	0	1	0	0	0	0	0	0	0
70.2602	LAKESHORE AREA RADIATION ONCOLOGY CENT	F	0	1	0	0	0	0	0	0	0
HSA 4: WEST MICHIGAN		7 Facilities	0	13	0	0	0	0	0	0	0
25.2620	MCLAREN CANCER INSTITUTE	F	0	3	0	0	0	0	0	0	0
25.C010	GENESYS HURLEY CANCER INSTITUTE	F	0	2	0	0	0	0	0	0	0
44.C004	MCLAREN CANCER INSTITUTE	F	0	1	0	0	0	0	0	0	0
78.C005	MEMORIAL HEALTHCARE CANCER CENTER	F	0	1	0	0	0	0	0	0	0

*Type of Unit: 1=Cobalt 2=Linear Accelerator 3=Gamma Knife 4=Stereotactic Radio-Surgery 5=OR Based Linear Accelerator 6=Total Body Irradiators 7=Cyber Knife 8=High MRT.

Data from Section F of the survey.

2013 Michigan Certificate of Need Annual Survey
Megavoltage Radiation Therapy Units, Hospitals and Freestanding Facilities
Report 080

Facility Number	Facility Name	Type	Type of Unit*								
			1	2	3	4	5	6	7	8	
HSA 5: GENESEE-LAPEER-SHIAWASSEE		4 Facilities	0	7	0	0	0	0	0	0	0
09.0020	BAY REGIONAL MEDICAL CENTER (WEST CAMP	H	0	1	0	0	0	0	0	0	0
29.C001	MIDMICHIGAN GRATIOT CANCER CENTER	F	0	1	0	0	0	0	0	0	0
37.0010	MCLAREN - CENTRAL MICHIGAN	H	0	1	0	0	0	0	0	0	0
56.0020	MIDMICHIGAN MEDICAL CENTER-MIDLAND	H	0	1	1	0	0	0	0	0	0
65.C001	SETON CANCER CENTER - WEST BRANCH	F	0	2	0	0	0	0	0	0	0
73.C001	SETON CANCER CENTER - SAGINAW	F	0	2	0	0	0	0	0	1	0
73.C003	SAGINAW RADIATION ONCOLOGY CENTER	F	0	1	0	0	0	0	0	0	0
76.C001	SETON CANCER CENTER - MARLETTE	F	0	1	0	0	0	0	0	0	0
HSA 6: EAST CENTRAL		8 Facilities	0	10	1	0	0	0	0	1	0
04.0010	ALPENA REGIONAL MEDICAL CENTER	H	0	1	0	0	0	0	0	0	0
24.0030	MCLAREN NORTHERN MICHIGAN HOSPITAL	H	0	2	0	0	0	0	0	0	0
28.0010	MUNSON MEDICAL CENTER	H	0	3	0	0	0	0	0	0	0
HSA 7: NORTHERN LOWER		3 Facilities	0	6	0	0	0	0	0	0	0
22.0020	DICKINSON COUNTY HEALTHCARE SYSTEM	H	0	1	0	0	0	0	0	0	0
52.0050	MARQUETTE GENERAL HOSPITAL	H	0	1	0	0	0	0	0	0	0
HSA 8: UPPER PENINSULA		2 Facilities	0	2	0	0	0	0	0	0	0
State Total		69 Facilities	0	117	3	0	0	0	0	3	1

*Type of Unit: 1=Cobalt 2=Linear Accelerator 3=Gamma Knife 4=Stereotactic Radio-Surgery 5=OR Based Linear Accelerator 6=Total Body Irradiators 7=Cyber Knife 8=High MRT.

Data from Section F of the survey.