

MRI Service Utilization List, November 1, 2025

MOBILE ROUTES #48 - #58

Reporting Period July 1, 2024 through June 30, 2025

Service ID BHS ID	Service Name	No. of Clinical Units <u>1</u>	No. of Visits	No. of AP <u>2</u>	Footnotes	No. of AAP
920077	Mobile #48	2	6,150	10,015		0
130031	Bronson Battle Creek Hospital		16	19		
800041	Bronson Lakeview Hospital		674	983		
800020	Bronson South Haven Hospital		860	1,295		
82C004	Dynamic MRI		984	1,420		
230021	Eaton Rapids Medical Center		40	63		
380010	Henry Ford Health Jackson Hosp		1,674	3,086		
70C012	Holland Medical Office Building		576	855		
63C791	OMIC, LLC		168	232		
63C013	Parkwood Imaging		1,137	2,020		
750010	Sturgis Hospital		21	42		
920232	Mobile #50	2	4,096	7,573		0
41C040	Mercy Health Southwest Campus		12	14		
61C014	Mercy Hlth Muskegon Hlth Pavilion		25	37		
700010	Trinity Health Grand Haven Hospital		1,623	2,392		
640021	Trinity Health Shelby Hospital		2,436	5,130		
930046	Mobile #51	1	3,261	4,249		0
636017	Childrens Specialty Center		40	65		
50C663	Childrens Specialty Ctr/Clinton Twp		40	74		
230021	Eaton Rapids Medical Center		6	8		
63C793	Michigan MRI		2,576	2,865		
750020	Three Rivers Health		599	1,237		
930161	Mobile #53	1	1,830	4,374		0
82C017	Northland Radiology		7	22		
63C672	Northland Radiology-Southfield		1,818	4,336		
81C665	Northland Radiology-Ypsilanti		5	16		
950021	Mobile #55	1	1,774	2,620		0
50C044	Ascension St. John Health Ctr		1,774	2,620		
950032	Mobile #56	1	943	1,284		0
50C047	Ascension St. John at Romeo Plank		285	315		
50C044	CLOSED Ascension St. John Health		69	97		
740030	Henry Ford Hlth River District Hosp		589	872		
950054	Mobile #58	1	2,473	3,496		0
39C030	Ascension Borgess 1700 Gull Road		6	12		
736811	MyMichigan Medical Cntr/Towne Cntr		2,467	3,484		

**MRI Service Utilization List
November 1, 2025 Footnotes**

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 16 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 18(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 18(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 16(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 18(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 July 1, 2024, through June 30, 2025, 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 January 26, 2023)
Certificate of Need Section, Michigan Department of Health and Human Services