

MRI Service Utilization List, November 1, 2024

MOBILE ROUTES #168 - #210

Reporting Period July 1, 2023 through June 30, 2024

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
050152	Mobile #168	1	1,851	2,522		0
47C014	Providence Med Ctr Livingston		1,045	1,374		
50C655	St. John Medical Ctr Macomb Twp		806	1,148		
050442	Mobile #174	2	5,808	10,673		0
63C772	Oakland Medical Group/Roch Hills		2,933	5,712		
63C660	Oakland Medical Grp/Madison Heights		2,875	4,961		
060198	Mobile #179	1	1,465	3,690		0
636017	Children's Specialty Center of Mich		749	1,829		
50C663	Childrens Specialty Ctr/Clinton Twp		716	1,861		
070047	Mobile #187	2	7,441	11,359		0
41C037	Corewell Health Medical Group West		114	175		
706001	Spectrum Health Grand Haven Ctr		2,689	3,857		
41C038	Spectrum Health West Pavilion		4,638	7,327	<u>4</u>	
080258	Mobile #199	1	2,865	4,631		0
820010	Corewell Health Wayne Hospital		482	797		
82C046	Livonia Medical Center-Imaging		2,367	3,808		
28C013	Novello Imaging, PLC		16	26		
080390	Mobile #202	2	7,599	11,152		0
61C014	Mercy Hlth Muskegon Hlth Pavilion		3,856	5,297		
640021	Trinity Health Shelby Hospital		21	36		
476811	Trinity Health Surg Ctr- Brighton		3,722	5,819		
090319	Mobile #207	1	1,688	2,322		0
63C101	Premier Imaging - Novi		3	3		
50C021	Premier Imaging-Clinton Township		46	63		
63C755	Premier Imaging-Southfield		1,639	2,256		
100111	Mobile #209	1	2,656	3,892		0
33C617	CLOSED-Mid-Michigan Physicians		385	548		
63C819	Clarkston Imaging Center		1,486	2,317		
25C073	McLaren Flint - Fenton Imaging		591	774		
500060	McLaren Macomb		34	39		
50C037	McLaren Macomb-Bay River		160	214		
100329	Mobile #210	1	2,683	4,142		0
82C735	CLOSED-Beaumont Imaging Canton		1,746	2,662		
740010	Lake Huron Medical Center		366	592		
746815	Lake Huron Medical Center - North		571	888		

**MRI Service Utilization List
November 1, 2024 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, 2023, through June 30, 2024, 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