

Shields Imaging at Heywood
Healthcare, LLC

SIGNIFICANT AMENDMENT

DoN Application Number:
N/A-25042215-AM

June 23, 2025

BY

Shields Imaging at Heywood
Healthcare, LLC

700 Congress Street, Suite 204
Quincy MA, 02169

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Attachment 1:

DoN Application



Massachusetts Department of Public Health

Determination of Need

Application Form

Version: 11-8-17

Application Type:	Amendment	Application Date:	06/23/2025 10:13 am
Applicant Name:	Shields Imaging at Heywood Healthcare, LLC		
Mailing Address:	700 Congress Street		
City:	Quincy	State:	Massachusetts
		Zip Code:	02169
Contact Person:	Kerry Whelan	Title:	Vice President of Government Affairs
Mailing Address:	700 Congress Street		
City:	Quincy	State:	Massachusetts
		Zip Code:	02169
Phone:	6173767421	Ext:	
E-mail:	kerry@shields.com		

Facility Information

List each facility affected and or included in Proposed Project

1 Facility Name:	Shields MRI at Heywood Healthcare		
Facility Address:	242 Green Street, Suite 1		
City:	Gardner	State:	Massachusetts
		Zip Code:	01440
Facility type:	clinic	CMS Number:	110197726A
Add additional Facility		Delete this Facility	

1. About the Applicant

1.1 Type of organization (of the Applicant):	for profit
1.2 Applicant's Business Type:	<input type="radio"/> Corporation <input type="radio"/> Limited Partnership <input type="radio"/> Partnership <input type="radio"/> Trust <input checked="" type="radio"/> LLC <input type="radio"/> Other
1.3 What is the acronym used by the Applicant's Organization?	N/A
1.4 Is Applicant a registered provider organization as the term is used in the HPC/CHIA RPO program?	<input type="radio"/> Yes <input checked="" type="radio"/> No
1.5 Is Applicant or any affiliated entity an HPC-certified ACO?	<input type="radio"/> Yes <input checked="" type="radio"/> No
1.6 Is Applicant or any affiliate thereof subject to M.G.L. c. 6D, § 13 and 958 CMR 7.00 (filing of Notice of Material Change to the Health Policy Commission)?	<input type="radio"/> Yes <input checked="" type="radio"/> No
1.7 Does the Proposed Project also require the filing of a MCN with the HPC?	<input type="radio"/> Yes <input checked="" type="radio"/> No

- 1.8 Has the Applicant or any subsidiary thereof been notified pursuant to M.G.L. c. 12C, § 16 that it is exceeding the health care cost growth benchmark established under M.G.L. c. 6D, § 9 and is thus, pursuant to M.G.L. c. 6D, §10 required to file a performance improvement plan with CHIA? ☐ Yes ☒ No

1.9 Complete the Affiliated Parties Form

2. Project Description

2.1 Provide a brief description of the scope of the project.

The proposed request is filed with respect to the previously approved DoN Project #21021213-HS that established a licensed clinic to provide magnetic resonance imaging ("MRI") services at Heywood Hospital and positron emission tomography/computed tomography ("PET/CT") services at Athol Hospital. The MRI clinic is located at 242 Green Street, Suite 1, Gardner, MA 01440. The MRI service currently operates six days per week at this location. The Applicant requests approval to add one additional day of MRI services at this location ("Proposed Project") for a total of seven days.

2.2 and 2.3 Complete the Change in Service Form

3. Delegated Review

3.1 Do you assert that this Application is eligible for Delegated Review? ☒ Yes ☐ No

3.1.a If yes, under what section?

4. Conservation Project

4.1 Are you submitting this Application as a Conservation Project? ☐ Yes ☒ No

5. DoN-Required Services and DoN-Required Equipment

5.1 Is this an application filed pursuant to 105 CMR 100.725: DoN-Required Equipment and DoN-Required Service? ☒ Yes ☐ No

5.2 If yes, is Applicant or any affiliated entity thereof a HPC-certified ACO? ☐ Yes ☒ No

5.3 See section on DoN-Required Services and DoN-Required Equipment in the Application Instructions

6. Transfer of Ownership

6.1 Is this an application filed pursuant to 105 CMR 100.735? ☐ Yes ☒ No

7. Ambulatory Surgery

7.1 Is this an application filed pursuant to 105 CMR 100.740(A) for Ambulatory Surgery? ☐ Yes ☒ No

8. Transfer of Site

8.1 Is this an application filed pursuant to 105 CMR 100.745? ☐ Yes ☒ No

9. Research Exemption

9.1 Is this an application for a Research Exemption? ☐ Yes ☒ No

10. Amendment

10.1 Is this an application for a Amendment? ☒ Yes ☐ No

10.2 This Amendment is: ☐ Immaterial Change ☐ Minor Change ☒ Significant Change

10.3 Original Application number:

10.3.a Original Application Type:

DoN-Required Equipment

10.3.b Original Application filing date:

07/29/2021

10.3.c Have there been any approved Amendments to the original Application?

☐ Yes

☒ No

For Significant Amendment Changes:

10.5.a Describe the proposed change.

The Applicant currently operates a licensed clinic that provides MRI services at Heywood Hospital a located at 242 Green Street, Suite 1, Gardner, MA 01440. The Proposed Project seeks approval to add one additional day of MRI service at this location, for a total of seven days of operation.

10.5.b Describe the associated cost implications to the Holder.

The Proposed Project will have no capital cost implications to the Applicant. The MRI service is an existing service operated by the Applicant, and the Proposed Project will not result in any additional capital costs to operate the MRI one additional day per week.

10.5.c Describe the associated cost implications to the Holder's existing Patient Panel.

The Proposed Project will have no capital cost implications to the Applicant's patient panel. The Applicant currently provides MRI services in Gardner six days per week and upon DoN Approval will provide a total of seven days of service. All pricing will remain consistent with current charges.

10.5.d Provide a detailed narrative, comparing the approved project to the proposed Significant Change, and the rationale for such change.

Shields Imaging at Heywood Healthcare, LLC is a joint venture between Heywood and Shields that received Determination of Need ("DoN") approval (#21021213-HS) to establish a licensed clinic to provide magnetic resonance imaging ("MRI") services at Heywood Hospital and positron emission tomography/computed tomography ("PET/CT") services at Athol Hospital.

Pursuant to the original DoN, the Applicant operates the MRI service six (6) days per week at Heywood Hospital located at 242 Green Street, Suite 1, Gardner, MA 01440. Demand for MRI services at Heywood Hospital has increased, resulting in the need for additional MRI capacity. The MRI unit currently operates at Heywood Hospital Monday through Saturday. Demand for MRI services has increased, resulting in the need for additional MRI capacity at this location.

Historic utilization data shows an increase in patient scans over the last two years and year to date since the joint venture became operational. The Applicant performed 4515 scans in 2023; and 6,767 scans in 2024. This represents an approximate 49% increase in scans between 2023 and 2024. Moreover, the Applicant experienced an increase in unique patients presenting for scans. The Applicant saw 1235 unique patients in 2023, and 2198 in 2024. This is an increase of 63.3% from 2023 to 2024.

The Proposed Project seeks to meet the need for increased access to MRI for the Applicant's patient panel. As described above, demand has significantly increased over the last two years and year to date. This data demonstrates an increased need for access to MRI at the clinic, and has resulted in an average wait time of 11.2 days for MRIs with contrast and 6.5 days for non-contrast MRIs.

The additional day of service will improve wait times, preventing delays in care. As MRI is utilized to detect and monitor conditions that affect soft tissue such as tumorous and brain disorders for which timely access to imaging is an essential element of the patient's treatment plan.

Moreover, the Applicant anticipates increased demand for MRI services as the population ages. Based on 2024 data, approximately 70% of the Applicants patients are over the age of 50. Accordingly, due to the nature of the patient conditions presenting to Applicant and the age of the existing patient panel, it is important that patients have timely and convenient access to this service.

The additional day of service will allow the Applicant to meet the need for patients requiring MRI services that would otherwise have to travel to another less convenient facility or would be subject to extended wait times at the Applicant's clinic.

The Applicant projects the additional day of service would result in approximately 7,342 scans in 2025; 7,929 scans in 2026; 8,564 scans in 2027 and 9,249 scans in 2028. By increasing capacity one day per week, The Applicant will be able to accommodate the needs of its existing patient panel, for whom MRI is an integral modality as part of their diagnosis and treatment planning.

Accordingly, the Applicant seeks to add one additional day of MRI service at Shields Imaging at Heywood Healthcare, LLC to meet the demonstrated need of its patient panel for additional access.

☒ The Holder hereby swears or affirms that the above statements with respect to the proposed Significant Change are True.

11. Emergency Application

11.1 Is this an application filed pursuant to 105 CMR 100.740(B)?

☐ Yes

☒ No

12. Total Value for Significant Amendments

Enter all currency in numbers only. No dollar signs or commas. Grayed fields will auto calculate depending upon answers above.

Your project application is for a: **Significant Amendment**

Filing Fee: \$0

12.1 Proposed increase in total value of this project:

\$0.00

12.2 Total increase in CHI commitment expressed in dollars: (calculated)

\$0.00

12.3 Total proposed Construction costs, specifically related to the Proposed Project, If any, which will be contracted out to local or minority, women, or veteran-owned businesses expressed in estimated total dollars.

\$0.00

13. Factors

Required Information and supporting documentation consistent with 105 CMR 100.210

Some Factors will not appear depending upon the type of license you are applying for.

Text fields will expand to fit your response.

Documentation Check List

The Check List below will assist you in keeping track of additional documentation needed for your application. Once you have completed this Application Form the additional documents needed for your application will be on this list. E-mail the documents as an attachment to: DPH.DON@state.ma.us

- ☒ Copy of Notice of Intent
- ☐ Affidavit of Truthfulness Form
- ☐ Electronic copy of Staff Summary for Approved DoN
- ☐ Electronic copy of Original Decision Letter for Approved DoN
- ☐ Change in Service Tables Questions 2.2 and 2.3
- ☐ Certification from an independent Certified Public Accountant

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form.
To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit
Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

This document is ready to file:



Date/time Stamp: 06/23/2025 10:13 am

E-mail submission to
Determination of Need

Application Number: N/A-25042215-AM

Use this number on all communications regarding this application.

☐ Community Engagement-Self Assessment form

Attachment 2:

Change in Service Form

Add/Del Rows	Licensed Beds	Operating Beds	Change in Number of Beds (+/-)		Number of Beds After Project Completion (calculated)		Patient Days (Current/ Actual)	Patient Days Projected	Occupancy rate for Operating Beds		Average Length of Stay (Days)	Number of Discharges Actual	Number of Discharges Projected
Adult	Existing	Existing	Licensed	Operating	Licensed	Operating			Current Beds	Projected			
Adolescent									0%	0%			
Pediatric									0%	0%			
Geriatric									0%	0%			
<input type="checkbox"/> <input type="checkbox"/>									0%	0%			
Total Acute Psychiatric									0%	0%			
Chronic Disease									0%	0%			
<input type="checkbox"/> <input type="checkbox"/>									0%	0%			
Total Chronic Disease									0%	0%			
Substance Abuse									0%	0%			
detoxification									0%	0%			
short-term intensive									0%	0%			
<input type="checkbox"/> <input type="checkbox"/>									0%	0%			
Total Substance Abuse									0%	0%			
Skilled Nursing Facility									0%	0%			
Level II									0%	0%			
Level III									0%	0%			
Level IV									0%	0%			
<input type="checkbox"/> <input type="checkbox"/>									0%	0%			
Total Skilled Nursing									0%	0%			

2.3 Complete the chart below if there are changes other than those listed in table above.

Add/Del Rows	List other services if Changing e.g. OR, MRI, etc				Existing Number of Units	Change in Number +/-	Proposed Number of Units	Existing Volume	Proposed Volume
<input type="checkbox"/> <input type="checkbox"/>	MRI: Addition of one day for a total of seven days of service				6	1	7	6,767	7,929

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E-mail submission to
Determination of Need

Date/time Stamp: 06/23/2025 10:16 am

Attachment 3:

Affiliated Parties Form



Massachusetts Department of Public Health Determination of Need Affiliated Parties

DRAFT
Version:
3-15-17
DRAFT

Application Date: 06/23/2025

Application Number: N/A-25042215-AM

Applicant Information

Applicant Name: Shields Imaging at Heywood Healthcare, LLC

Contact Person: Kerry Whelan

Title: Vice President of Government Affairs

Phone: 6173767421

Ext:

E-mail: kerry@shields.com

Affiliated Parties

1.9 Affiliated Parties:

List all officers, members of the board of directors, trustees, stockholders, partners, and other Persons who have an equity or otherwise controlling interest in the application.

Add/ Del Rows	Name (last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
<input type="checkbox"/>	Shields	Thomas	700 Congress Street	Quincy	MA	Shields Health	CEO	Partnership		No	See attached	
<input type="checkbox"/>	Ferrari	Peter	700 Congress Street	Quincy	MA	Shields Health	President	Partnership		No	See attached	
<input type="checkbox"/>	Penney	Rozanna	242 Green Street	Gardner	MA	Heywood Healthcare	CEO	Partnership		No	N/A	
<input type="checkbox"/>	Bujak	John	242 Green Street	Gardner	MA	Heywood Healthcare	CFO	Partnership		No	N/A	

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This document is ready to file:



Date/time Stamp: 06/23/2025 10:17 am

E-mail submission to
Determination of Need

Peter Ferrari Affiliated Parties

Legal Name	DBA	Service Location Address	City/Town	State	Zip	Medicare P7AN
South Shore MRI Limited Partnership	Shields MRI Weymouth	76 Rockway Ave	Weymouth	MA	02188-3906	327033
Shields MRI & Imaging Center of Cape Cod LLC	Shields MRI & Imaging Center of Cape Cod	2 Yonough Rd - Rt 28	W Yarmouth	MA	02673-8135	327057
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Shrewsbury St	214 Shrewsbury St	Worcester	MA	01604-4629	002737301
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Memorial Campus	119 Belmont St-U Mass Memorial Campus	Worcester	MA	01605-2903	002737302
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at Wing Hospital	40 W/High St	Palmer	MA	01069-1138	327040
U Mass Memorial MRI & Imaging Center LLC	Shields PETCT at UMass Memorial Burbank	275 Nichols Rd	Fitchburg	MA	01420-1919	0027373
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Site B	55 Lake Ave North Ste H1-713B	Worcester	MA	01655-0002	5300165800
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Site A	93 Lake Ave North Ste H1-351A	Worcester	MA	01655-0002	5300563649
U Mass Memorial MRI & Imaging Center LLC	Umass Memorial Health - Harrington Hospital at Southbridge	100 South Street	Southbridge	MA	01550	pending
U Mass Memorial MRI & Imaging Center LLC	UMass Memorial Health - Marlborough	157 Union Street	Marlborough	MA	01752	pending
Baystate MRI & Imaging Center LLC	Shields MRI and Baystate Health	80 Watson Ave	Springfield	MA	01107-1132	0018589
U Mass Memorial Healthcare MRI Center LLC	Shields MRI at UMass Memorial Health Alliance Campus	100 Hospital Rd Ste 1A	Leominster	MA	01453-2253	327082
U Mass Memorial MRI-Marlborough LLC	Shields MRI at UMass Memorial Marlborough Campus	157 Union St	Marlborough	MA	01752-1228	327115
Franklin MRI Center LLC	Shields MRI at Baystate Franklin Medical Center	164 High St	Greenfield	MA	01301-2613	0010942
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Harwich	525 Long Pond Dr	Harwich	MA	02645-1227	0010594
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Sandwich	2 Jan Sebastian Dr	Sandwich	MA	02568-2377	001059401
PET-CT Services By Tufts Medical Center and Shields LLC	Shields PETCT at Tufts Medical Center	800 Washington St	Boston	MA	02111-1552	0024437
PET-CT Services By Tufts Medical Center and Shields LLC	Metrowest PET-CT at Shields Framingham in Affiliation with Tufts Medical Center	14 Cochituate Rd Ste 1A	Framingham	MA	01701-7915	5300129479
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital	295 Varnum Ave	Lowell	MA	01854-2134	0025829
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Chelmsford	10 Research Pl	N Chelmsford	MA	01863-2456	002582901
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Saints Campus	1 Hospital Dr	Lowell	MA	01852-1311	5100138677
Winchester Hospital-Shields MRI LLC	Shields MRI Winchester Hospital at Unicorn Park	200 Unicorn Park Dr Ste 402	Woburn	MA	01801-3342	0033808
Winchester Hospital - Shields MRI	Winchester Hospital/Shields MRI	41 Highland Ave - Ste G1	Winchester	MA	01890-1446	5300624235
Shields Signature Imaging LLC	Shields Signature Imaging	680 Centre St	Brookton	MA	02302-3306	5300291877
Shields Sturdy PETCT LLC	Shields Sturdy PETCT	211 Park St	Attleboro	MA	02703-3143	5300305002
Shields PETCT at Cooley Dickinson Hospital LLC	Shields PETCT at Cooley Dickinson Hospital	30 Locust St	Northampton	MA	01060-2052	5300393217
Shields Imaging at Anna Jaques Hospital LLC	Shields Imaging at Anna Jaques Hospital	25 Highland Ave	Newburyport	MA	01950-3867	5300357334
Shields PET-CT at CHMMC LLC	Shields PETCT at CHMMC	300 Main St	Levenson	ME	04240-7027	5300352765
Shields PET-CT at CHMMC LLC	Shields PETCT at CHMMC @ Topsham	105 Topsham Fair Mall Rd	Topsham	ME	04086-1773	5300511797
Shields Imaging at York Hospital LLC	Shields Imaging at York Hospital	114 Sanford Rd	Wells	ME	04090-5533	5100388241
Shields PETCT at Berkshire Medical Center LLC	Shields PETCT at Berkshire Medical Center	165 Tor Court	Pittsfield	MA	01201-3001	5300426507
Shields Imaging of Portsmouth LLC	Shields MRI Portsmouth	1900 Lafayette Rd	Portsmouth	NH	03801-5679	n/a
Healthcare Enterprises LLC	The Surgery Center at Shrewsbury	151 Main St	Shrewsbury	MA	01546-2101	5300494903
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Topsham	105 Topsham Fair Mall Rd	Topsham	ME	04086-1773	5300498988
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Auburn	690 Minot Ave, Ste 1	Auburn	ME	4210	5300520539
Medford Surgery Center, LLC	Shields Surgery Center Medford	313 Speen St - Ste 200	Medford	MA	01760	5300693351
Chelmsford Surgery Center, LLC	The Surgery Center of the Merrimack Valley	10 Research Place	North Chelmsford	MA	02155	5300777754
Shields PETCT at Emerson	Shields PET/CT at Emerson	54 Baker Ave, Suite 104	Concord	MA	00742	110174240A
Shields Imaging at Heywood Healthcare	Shields PETCT at Heywood Healthcare	2033 Main Street	Athol	MA	01331	5301035199
Shields Imaging at Heywood Healthcare	Shields MRI at Heywood Healthcare	242 Green Street	Gardner	MA	01440	110197726A
Tufts Medicine: Shields PET-CT	Shields PETCT at Metrowest-Wakefield Healthcare	888 Main Street, Suite 100	Wakefield	MA	01880	5301095931

Peter Ferrari Affiliated Parties

Shields and Artius Health PE-CT at Dedham LLC	Shields PE/CT with Artius Health	40 Allied Dr - Ste 112-A	Dedham	MA	02026	Pending

Thomas Shields Affiliated Parties

Legal Name	DBA	Service Location Address	City/Town	State	Zip	Medicare PTAN
Southeastern Massachusetts Regional MRI Limited Partnership	Shields MRI Brockton	265 Westgate Dr	Brockton	MA	02301-1817	016469
Fall River-New Bedford Regional MRI Limited Partnership	Shields MRI Dartmouth	313 Faunce Corner Rd	Dartmouth	MA	02747-1252	018869
Fall River-New Bedford Regional MRI Limited Partnership	Shields MRI at St Luke's Hospital	361 Allen St	New Bedford	MA	02740-2107	002894
Shields Healthcare of Cambridge Inc	Shields MRI Brighton	385 Western Ave	Brighton	MA	02135-1005	020369
South Shore MRI Limited Partnership	Shields MRI Weymouth	26 Rockway Ave	Weymouth	MA	02188-3906	327033
Massachusetts Bay Regional MRI Limited Partnership	Shields MRI Boston	161 Granite Ave	Dorchester	MA	02124-5492	020169
Massachusetts Bay Regional MRI Limited Partnership	Shields MRI Dedham	40 Allied Dr - Ste 112	Dedham	MA	02026-6146	0034536
Shields MRI & Imaging Center of Cape Cod LLC	Shields MRI & Imaging Center of Cape Cod	2 Lynough Rd - Rt 28	Weymouth	MA	02673-8135	327057
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Shrewsbury St	214 Shrewsbury St	Worcester	MA	01604-4629	002737301
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial Memorial Campus	119 Belmont St-U Mass Memorial Campus	Worcester	MA	01605-2903	002737302
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at Wing Hospital	40 Wright St	Palmer	MA	01069-1138	327040
U Mass Memorial MRI & Imaging Center LLC	Shields PET/CT at UMass Memorial Butbank	275 Nichols Rd	Fitchburg	MA	01420-1919	0027373
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Site B	55 Lake Ave North Ste H1-7138	Worcester	MA	01655-0002	5300166800
U Mass Memorial MRI & Imaging Center LLC	Shields MRI at UMass Memorial University Campus Site A	55 Lake Ave North Ste H1-351A	Worcester	MA	01655-0002	530055649
U Mass Memorial MRI & Imaging Center LLC	UMass Memorial Health - Harrington Hospital at Southboro	100 South Street	Southbridge	MA	01550	pending
U Mass Memorial MRI & Imaging Center LLC	UMass Memorial Health - Marlborough Hospital	157 Union Street	Marlborough	MA	01752	pending
Baystate MRI & Imaging Center LLC	Shields MRI and Baystate Health	80 Watson Ave	Springfield	MA	01107-1132	0018589
Shields Imaging of Eastern Massachusetts LLC	Shields Imaging of Eastern Massachusetts	55 Forge Rd	Weymouth	MA	02130-2432	327068
U Mass Memorial Healthcare MRI Center LLC	Shields MRI at UMass Memorial Health Alliance Campus	100 Hospital Rd-Ste 1A	Leominster	MA	01453-2253	327062
Shields MRI of Framingham LLC	Shields MRI of Framingham	14 Cochituate Rd	Framingham	MA	01701-7915	327116
U Mass Memorial MRI-Marlborough LLC	Shields MRI at UMass Memorial Marlborough Campus	157 Union St	Marlborough	MA	01752-1228	327115
Franklin MRI Center LLC	Shields MRI at Baystate Franklin Medical Center	164 High St	Greenfield	MA	01301-2613	0010942
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Harwich	525 Long Pond Dr	Harwich	MA	02645-1227	0010694
Cape Cod PET-CT Services LLC	Shields PET Service of Cape Cod Sandwich	2 Jan Sebastian Dr	Sandwich	MA	02563-2377	001055401
PET-CT Services By Tufts Medical Center and Shields LLC	Shields PET/CT at Tufts Medical Center	800 Washington St	Boston	MA	02111-1552	0024437
PET-CT Services By Tufts Medical Center and Shields LLC	MacroPET PET-CT at Shields Framingham In Affiliation with Tufts Medical Center	14 Cochituate Rd-Ste 1A	Framingham	MA	01701-7915	5300129479
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital	295 Varnum Ave	Lowell	MA	01854-2134	00258729

Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Chelmsford	10 Research Pl	N Chelmsford	MA	01863-2456	002582901
Shields Imaging of Lowell General Hospital LLC	Shields MRI at Lowell General Hospital Saints Campus	1 Hospital Dr	Lowell	MA	01852-1311	5100136577
Winchester Hospital Shields MRI LLC	Shields MRI Winchester Hospital at Unicorn Park	200 Unicorn Park Dr-Site 402	Woburn	MA	01801-3342	0033808
Winchester Hospital - Shields MRI	Winchester Hospital/Shields MRI	41 Highland Ave - Site G1	Winchester	MA	01890-1446	5300634235
Shields Signature Imaging LLC	Shields Signature Imaging	680 Centre St	Brockton	MA	02302-3308	5300291877
Shields Study PETCT LLC	Shields Study PETCT	211 Park St	Attleboro	MA	02703-3143	5300305002
Shields PETCT at Cooley Dickinson Hospital LLC	Shields PETCT at Cooley Dickinson Hospital	30 Locust St	Northampton	MA	01060-2052	5300333217
Shields Imaging at Anna Jaques Hospital LLC	Shields Imaging at Anna Jaques Hospital	25 Highland Ave	Newburyport	MA	01950-3867	5300357534
Shields PET-CT at CMMC LLC	Shields PETCT at CMMC	300 Main St	Leviston	ME	04240-7027	E300352765
Shields PET-CT at CMMC LLC	Shields PETCT at CMMC @ Topham	105 Topham Fair Mall Rd	Topham	ME	04086-1773	E300511797
Shields Imaging at York Hospital LLC	Shields Imaging at York Hospital	114 Sanford Rd	Wells	ME	04090-5533	E100388241
Shields PETCT at Berkshire Medical Center LLC	Shields PETCT at Berkshire Medical Center	165 Tor Court	Pittsfield	MA	01201-3001	5300426507
Shields Imaging of Portsmouth LLC	Shields MRI Portsmouth	1900 Lafayette Rd	Portsmouth	NH	03801-5679	N/A
Healthcare Enterprises LLC	The Surgery Center at Shrewsbury	151 Main St	Shrewsbury	MA	01545-2101	5300494903
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Topham	105 Topham Fair Mall Rd	Topham	ME	04086-1773	E300498988
Shields Imaging with Central Maine Health LLC	Shields Imaging at Central Maine Health, Auburn	690 Minor Ave, Site 1	Auburn	ME	4210	E300520539
Natick Surgery Center, LLC	New England Surgical Suites	313 Speen St - Site 200	Natick	MA	01760	5300593361
Medford Surgery Center, LLC	Shields Surgery Center Medford	170 Governors Ave Site 100	Medford	MA	02155	5300777554
Chelmsford Surgery Center, LLC	The Surgery Center of the Merrimack Valley	10 Research Pl, Suite 101	N. Chelmsford	MA	02284	1101895484
Shields PETCT at Emerson	Shields PET/CT at Emerson Hospital	54 Baker Ave. Ext., Suite 104	Concord	MA	00742	5300756401
Shields PETCT at Heywood Healthcare	Shields Imaging at Heywood Healthcare	2033 Main Street	Attol	MA	01331	5301015199
Truix Medicine: Shields PET-CT	Shields PETCT at Monroe-Wakefield Healthcare	888 Main Street, Suite 100	Wakefield	MA	01860	5301095931
Shields and Arrius Health PET-CT at Dedham LLC	Shields PET/CT with Arrius Health	40 Allied Dr - Site 112-A	Dedham	MA	02026	pending

Attachment 4:

Notice of Intent

From: [Worcester Legals](#)
To:
Subject:
Date: Tuesday, May 6, 2025 10:53:44 AM

External Email: This email originated from outside Shields Health. **DO NOT CLICK** links or attachments unless you know and trust the sender. **Please** use the Phish Alert button to report suspicious email.

THANK YOU for your ad submission!

This is your confirmation that your order has been submitted. Below are the details of your transaction. Please save this confirmation for your records.

We appreciate you using our online self-service ads portal, available 24/7. Please continue to visit Worcester Telegram & Gazette's online Classifieds [HERE](#) to place your legal notices in the future.

Deadlines vary by publication, changes and/or cancellations may not be honored due to deadline restrictions.

Job Details

Order Number: **LNEO0292747**
Classification: **Govt Public Notices**
Package: **General Package**
Additional Options: **1 Affidavit \$5.00**

Base amount:
Service fee:
Cash/Check/ACH **◆**
Discount: **-\$0.00**
Total payment:

As an incentive for customers, we provide a discount off the total order cost equal to the 3.99% service fee if you pay with Cash/Check/ACH. Pay by Cash/Check/ACH and save! In no event are service fees refundable.

Payment Type: **mastercard**

Account Details

Schedule for ad number LNEO02927470

Sat May 10, 2025
Worcester Telegram & Gazette *All Zones*

Public Announcement Concerning a Proposed Health Care Project

Shields Imaging at Heywood Healthcare, LLC ("Applicant") located at 700 Congress Street, Suite 204, Quincy, MA 02169 intends to file a Notice of Determination of Need for a Significant Change ("Application") with respect to DON Project #21021213-HS. to add

maximum capital expenditure. The Applicant does not anticipate any price or service impacts on the Applicant's existing Patient Panel as a result of the Proposed Project. Any ten Taxpayers of Massachusetts may register in connection with the intended Application by no later than June 8, 2025 or 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, 250 Washington Street, 6th Floor, Boston, MA 02108.

May 10 2025

LNEO0292747

Worcester Telegram & Gazette

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Notice Popular Keyword Category:

Notice Keywords:

health care

Notice Authentication Number:

202506230920365275658

3223283816

Notice URL:

[Back](#)

Notice Publish Date:

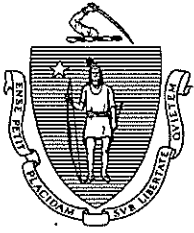
Saturday, May 10, 2025

Notice Content

Public Announcement Concerning a Proposed Health Care Project Shields Imaging at Heywood Healthcare, LLC ("Applicant") located at 700 Congress Street, Suite 204, Quincy, MA 02169 intends to file a Notice of Determination of Need for a Significant Change ("Application") with respect to DON Project #21021213-HS, to add one additional day of MRI services at 242 Green Street, Suite 1 Gardner, MA 01440. There is no cost associated with this Application and therefore no change to the total value of the Project based on the approved maximum capital expenditure. The Applicant does not anticipate any price or service impacts on the Applicant's existing Patient Panel as a result of the Proposed Project. Any ten Taxpayers of Massachusetts may register in connection with the intended Application by no later than June 8, 2025 or 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, 250 Washington Street, 6th Floor, Boston, MA 02108. May 10 2025 LNE00292747

[Back](#)

Attachment 5: Previous DoN Approval



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MARGRET R. COOKE
Acting Commissioner

Tel: 617-624-6000
www.mass.gov/dph

November 29, 2021

Kerry Whelan
Vice President of Government Affairs
Shields Health Care Group
700 Congress Street, Suite 204
Quincy, MA 02169

VIA EMAIL: kerry@shields.com

RE: Notice of Final Action: Shields PET-CT at Heywood Healthcare, LLC - Substantial
Change in Service
Application #21021213-HS

Dear Ms. Whelan:

This shall serve as notification that, based on the information provided by the Applicant and staff analysis, and pursuant to M.G.L. c. 111, § 25C and the regulatory provisions of 105 CMR 100.000 et seq, including 105 CMR 100.715 (DoN-required Services and DoN-required Equipment), and 105 CMR 100.630(6), I hereby approve the application for Determination of Need (DoN) filed by Shields PET-CT at Heywood Healthcare, LLC (Applicant) to establish a licensed clinic to provide magnetic resonance imaging (MRI) services at Heywood Hospital six days a week and mobile positron emission tomography-computed tomography (PET-CT) imaging services at Athol Hospital one day a week. The capital expenditure for the Proposed Project is \$2,570,562.00 (May 2021 dollars). The Community Health Initiative (CHI) contribution is \$128,528.10. This Notice of Final Action incorporates by reference the Memorandum concerning this Application and is subject to the conditions set forth therein.

In compliance with the provisions of 105 CMR 100.310 A (2) and (11) the Holder shall submit an acknowledgment of receipt to the Department (attached) and also include a written attestation of participation or intent to participate in MassHealth.

In compliance with the provisions of 105 CMR 100.310 A (12), which require a report to the Department, at a minimum on an annual basis, including the measures related to achievement of the DoN factors for a period of five years from completion of the Proposed Project, the Holder shall address its assertions with respect to all the factors.

Other Conditions to the DoN:

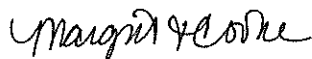
1. Of the total required CHI contribution of \$128,528.10
 - a. \$12,338.70 will be directed to the CHI Statewide Initiative
 - b. \$111,048.28 will be dedicated to local approaches to the DoN Health Priorities
 - c. \$5,141.12 will be designated as the administrative fee.
2. To comply with the Holder's obligation to contribute to the Statewide CHI Initiative, the Holder must submit a check for \$12,338.70 to Health Resources in Action (the fiscal agent for the CHI Statewide Initiative).
 - i. The Holder must submit the funds to HRiA within 30 days from the date of the Notice of Approval.
 - ii. The Holder must promptly notify DPH (CHI contact staff) when the payment has been made.

To comply with the obligation to contribute to the CHI Statewide Initiative, please submit a check for \$12,338.70 to Health Resources in Action (the fiscal agent for the CHI Statewide Initiative) **within 30 days** from the date of this Notice of Approval. Please notify DPH (CHI contact staff) when the payment has been made. Payment should be sent to:

Health Resources in Action, Inc., (HRiA)
2 Boylston Street, 4th Floor
Boston, MA 02116
Attn: Ms. Bora Toro

Ongoing compliance with the conditions and all terms of the DoN is, pursuant to the Regulation, a precondition to the filing of any future DoN by the Holder.

Sincerely,



Margret R. Cooke

Acting Commissioner

cc:

Elizabeth D. Kelley, Bureau of Health Care Safety and Quality
Stephen Davis, Bureau of Health Care Safety and Quality
Rebecca Rodman, General Counsel's Office
Daniel Gent, Division of Health Care Facility Licensure and Certification
Samuel Louis, Office of Health Equity
Mary Byrnes, Center for Health Information Analysis
Zhao Zhang, MassHealth
Katherine Mills, Health Policy Commission
Eric Gold, Office of the Attorney General
Elizabeth Maffei, Division of Community Health Planning and Engagement

Jennica Allen, Division of Community Health Planning and Engagement

Attachment 6:
Certificate of Organization

ARTICLES OF ORGANIZATION

Shields Imaging at Heywood Healthcare, LLC

Articles of Organization (2021):

https://corp.sec.state.ma.us/CorpWeb/CorpSearch/CorpSummary.aspx?sysvalue=Lh8QSx8MIm_68wqOMwg1_wNnp0INCXBm.gveHEej0c-

Attachment 7:
Affidavit of Truthfulness &
Compliance



Massachusetts Department of Public Health
Determination of Need
Affidavit of Truthfulness and Compliance
with Law and Disclosure Form 100.405(B)

Version: 7-6-17

Instructions: Complete Information below. When complete check the box "This document is ready to print:". This will date stamp and lock the form. Print Form. Each person must sign and date the form. When all signatures have been collected, scan the document and e-mail to: **dph.don@state.ma.us** Include all attachments as requested.

Application Number: N/A-25042215-AM

Original Application Date: 6/23/25

Applicant Name: Shields Imaging at Heywood Healthcare, LLC

Application Type: Amendment Significant

Applicant's Business Type: ☐ Corporation ☐ Limited Partnership ☐ Partnership ☐ Trust ☒ LLC ☐ Other

Is the Applicant the sole member or sole shareholder of the Health Facility(ies) that are the subject of this Application? ☐ Yes ☒ No

Describe the role /relationship: NA

The undersigned certifies under the pains and penalties of perjury:

1. The Applicant is NA;
2. I have read 105 CMR 100.000, the Massachusetts Determination of Need Regulation;
3. I understand and agree to the expected and appropriate conduct of the Applicant pursuant to 105 CMR 100.800;
4. I have read this application for Determination of Need including all exhibits and attachments, and certify that all of the information contained herein is accurate and true;
5. I have caused, as required, notices of intent to be published and duplicate copies to be submitted to all Parties of Record, and all carriers or third-party administrators, public and commercial, for the payment of health care services with which the Applicant contracts, and with Medicare and Medicaid, as required by 105 CMR 100.405(C), et seq.;
6. If subject to M.G.L. c. 6D, § 13 and 958 CMR 7.00, I have submitted such Notice of Material Change to the HPC - in accordance with 105 CMR 100.405(G);
7. Pursuant to 105 CMR 100.210(A)(3), I certify that both the Applicant and the Proposed Project are in material and substantial compliance and good standing with relevant federal, state, and local laws and regulations, as well as with all previously issued Notices of Determination of Need and the terms and Conditions attached therein;
8. I have read and understand the limitations on solicitation of funding from the general public prior to receiving a Notice of Determination of Need as established in 105 CMR 100.415;
9. I understand that, if Approved, the Applicant, as Holder of the DoN, shall become obligated to all Standard Conditions pursuant to 105 CMR 100.310, as well as any applicable Other Conditions as outlined within 105 CMR 100.000 or that otherwise become a part of the Final Action pursuant to 105 CMR 100.360;
10. Pursuant to 105 CMR 100.705(A), I certify that the Applicant has Sufficient Interest in the Site or facility; and
11. Pursuant to 105 CMR 100.705(A), I certify that the Proposed Project is authorized under applicable zoning by-laws or ordinances, whether or not a special permit is required; or,
 - a. If the Proposed Project is not authorized under applicable zoning by-laws or ordinances, a variance has been received to permit such Proposed Project; or,
 - b. The Proposed Project is exempt from zoning by-laws or ordinances.

LLC

All parties must sign. Add additional names as needed.

Thomas Shields

Name:

Signature:

05/16/2025

Date

This document is ready to print: ☒

Date/time Stamp: