

Attachments:

1. Notice of Intent
2. DON Application 5.2.a: 12/27/23 HPC Certified ACO Approval Letter
3. DON Application 10.3.d: Previous DoN and Amendment Approvals

Attachment 1:
Notice of Intent

1/6/26, 12:58 PM

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Tuesday, December 23, 2025

Notice Content

Public Announcement Concerning a Proposed Health Care Project Baystate MRI and Imaging Center, 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 #4-4886, to add two additional days of PET/CT services at Baystate MRI and Imaging Center, LLC located at 80 Wason Avenue, Springfield, MA 01107. 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 January 22, 2026 or 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program at, 67 Forest Street, Marlborough, MA 01752. (December 23, 2025)

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Shields Health website: <https://shields.com/locations/springfield/>

Public Announcement Concerning a Proposed Health Care Project

Baystate MRI and Imaging Center, 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 #4-4886, to add two additional days of PET/CT services at Baystate MRI and Imaging Center, LLC located at 80 Wason Avenue, Springfield, MA 01107. 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 January 22, 2026 or 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program at, 67 Forest Street, Marlborough, MA 01752.

Attachment 2:

DON Application 5.2.a:
12/27/23 HPC Certified ACO Approval Letter



DEBORAH DEVAUX
CHAIR

The Commonwealth of Massachusetts

HEALTH POLICY COMMISSION

50 MILK STREET, 8TH FLOOR
BOSTON, MASSACHUSETTS 02109
(617) 979-1400

DAVID M. SELTZ
EXECUTIVE DIRECTOR

December 27, 2023

Carlos Martins
Baycare Health Partners, Inc.
101 Wason Avenue, Suite 200
Springfield, MA 01107

RE: ACO LEAP Re-Certification

Dear Mr. Martins:

Congratulations! The Health Policy Commission (HPC) is pleased to inform you that Baycare Health Partners, Inc. meets the requirements for ACO Certification under our Learning, Equity, and Patient-Centeredness (LEAP) standards. This certification is effective from January 1, 2024, through December 31, 2025.

The ACO Certification program, in alignment with other state agencies including MassHealth, is designed to accelerate care delivery transformation in Massachusetts and promote a high quality, efficient health system. ACOs participating in the program have met a set of objective criteria focused on core ACO capabilities demonstrating dedication to patient-centered care, use of evidence-based and data-driven strategies to improve care delivery, and commitment to addressing long-standing health inequities. Baycare Health Partners, Inc. meets those criteria.

The HPC will promote Baycare Health Partners, Inc. as a Certified ACO on our website and in our marketing and public materials. Enclosed you will find an ACO Certification logo for your organization to use in accordance with the attached Terms of Use. We hope you will use the logo on promotional materials when you highlight your ACO Certification to your patients, payers, and others.

The HPC looks forward to your continued engagement in the ACO Certification program over the next two years.

Thank you for your dedication to providing accountable, coordinated health care to your patients, and to continued learning and improvement over time. If you have any questions about this letter or the ACO Certification program, please do not hesitate to contact Mike Stanek, Associate Director, at HPC-Certification@mass.gov or (617) 757-1649.

Best wishes,

A handwritten signature in blue ink that reads "David Seltz".

David Seltz
Executive Director

Attachment 3:
DON Application 10.3.d:
Previous DoN and Amendment Approvals
Project #4-4886

- 02/05/2002 - DON-Required Equipment
- 04/03/2003 - Amendment
- 09/27/2005 - Amendment
- 08/09/2006 - Amendment
- 10/12/2011 - Amendment
- 12/13/2013 - Amendment
- 10/01/2018 - Amendment
- 03/31/2021 - Amendment (*note filing date 01/26/2021*)
- 03/27/2023 - Amendment



JANE SWIFT
GOVERNOR

ROBERT P. GITTENS
SECRETARY

HOWARD K. KOH MD, MPH
COMMISSIONER

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Determination of Need Program
250 Washington Street, Boston, MA 02108-4619
(617) 624-5002

February 5, 2002

CERTIFIED MAIL
RETURNED RECEIPT REQUESTED

NOTICE OF DETERMINATION OF NEED
Project Number 4-4886
Shields Imaging of Massachusetts, LLC
(Establish Mobile PET Service)

Andrew Levine, Esq.
Donoghue, Barrett & Singal, P.C.
One Beacon Street
Boston, MA 02108

Dear Mr. Levine:

At their meeting of January 22, 2002 the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, s25C and the Regulations adopted thereunder, to approve with conditions, the application filed by Shields Imaging of Massachusetts, LLC for a Determination of Need. The application, as approved, provides for provision of Positron Emission Tomography (PET) services through acquisition of a mobile PET body scanner and related equipment. The services will be provided at three host sites: South Shore Hospital in Weymouth, UMass Memorial Medical Center in Worcester, and Baystate Medical Center in Springfield. This Notice of Determination of Need incorporates by reference the attached Staff Summary and the Public Health Council proceedings concerning this application.

The approved maximum capital expenditure of \$2,564,000 (February 2001 dollars) is itemized below:

Major Movable Equipment	\$2,504,000
Other: Fair Market Value of Shared Space at Host Sites	60,000
Total Construction Costs	<u>\$2,564,000</u>
Total Maximum Capital Expenditure	<u>\$2,564,000</u>

The approved MCE of \$2,564,000 (February 2001 dollars) will be funded with a 23.4% equity contribution (\$600,000 in February 2001 dollars), whereby Shields Imaging of Massachusetts, UMass Memorial Medical Center, and Baystate Medical Center's hospital affiliate, Baystate Radiology Imaging, LLC will contribute proportional equity shares that are yet to be determined. The remaining MCE of \$1,964,000 (February 2001 dollars) will be financed through the vendor, Siemens Medical Systems, Inc., at an interest rate of 9% for a sixty (60) month term.

Shields Imaging of Massachusetts

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Project No. 4-4886

The approved operating costs of \$3,135,291 (February 2001 dollars) for the project's first full year of operation (FY 2003), are based on a projected volume of 1,500 PET scans in that year, and are itemized as follows:

Salaries, Wages, Fringe Benefits	\$ 495,000
Supplies and Other Expenses	1,685,300
Purchased Services	315,200
Depreciation	506,800
Interest	<u>132,991</u>
Total Operating Costs	\$3,135,291

The reasons for this approval with conditions are as follows:

1. Shields Imaging of Massachusetts, LLC proposes to provide Positron Emission Tomography (PET) services through acquisition of a mobile PET body scanner and ancillary equipment, including a trailer. The services will be provided at three host sites: South Shore Hospital in Weymouth, UMass Memorial Medical Center in Worcester, and Baystate Medical Center in Springfield.

2. The Department found that the project meets the requirements of the health planning process consistent with the Guidelines for Positron Emission Tomography (Guidelines).

3. The Department found that Shields Imaging of Massachusetts, LLC has demonstrated demand for a mobile PET unit to serve South Shore Hospital, UMass Memorial Medical Center, and Baystate Medical Center, as discussed under the Health Care Requirements factor of the Staff Summary.

4. The Department found that the project, with adherence to a certain condition, meets the operational objectives factor of the DoN Regulations.

5. The Department found that the project meets the standards compliance factor of the DoN Regulations.

6. The Department found the recommended maximum capital expenditure of \$2,564,000 (February 2001 dollars) reasonable, based on the price quote from the PET equipment vendor, which, when the trailer is excluded, is similar to comparable projects.

7. The Department found the recommended incremental operating costs of \$3,135,291 (February 2001 dollars) are reasonable for a freestanding mobile PET service.

8. The Department found the project financially feasible and within the financial capability of the applicant.

9. The Department found the project meets the relative merit requirements of the DoN Regulations.

10. The Department found the project, with adherence to a certain condition, meets the community health service initiatives of the DoN Regulations.

11. The Mark R. Taylor, Mary T. Sweeney, and Stephen M. Weiner Ten Taxpayer Groups (TTGs)

Feb-05-02 11:25am From-Dept OF Public Health

T-480 P.004/005 F-619

Shields Imaging of Massachusetts

3

Project No. 4-4886

registered in connection with the proposed project. The Brockton Ten Taxpayer Group originally registered as well and requested a public hearing, but subsequently rescinded its request on August 6, 2001, and withdrew as a TTG on August 7, 2001. The Taylor TTG submitted written comments, which indicated that there was excess capacity at New England PET Imaging System in Methuen, a DoN exempt physician practice. The Department found that this excess capacity has not eliminated demand for existing PET services at Massachusetts General Hospital and Dana Farber Cancer Institute, as indicated by patient waiting times at these facilities.

12. The Department found that this project is one of four comparable applications filed by Shields-Imaging of Massachusetts, LLC, Children's Hospital Medical Center, Brigham and Women's Hospital, and Beth Israel Deaconess Medical Center. When considered alone, all of the applications are capable of being approved, since each has demonstrated demand for PET services. A detailed comparability analysis was not undertaken since each of the four applications meets all the review factors of the PET Guidelines.

This Determination is effective twenty (20) days after receipt of this Notice. The Determination is subject to the conditions set forth in Determination of Need Regulation 105 CMR 100.551, including sections 100,551 (C) and (D) which read in part:

- (C) ...such determination shall be valid authorization only for the project for which made and only for the total capital expenditure approved.
- (D) The determination...shall be valid authorization for three (3) years. If substantial and continuing progress toward completion is not made during the three (3) year authorization period, the authorization shall expire if not extended by the Department for good cause shown (see 105 CMR 100.756)... Within the period of authorization, the holder shall make a substantial and continuing progress toward completion; however, no construction may begin until the holder has received final plan approval in writing from the Division of Health Care Quality.

This Determination is subject to the following conditions, in addition to the terms and conditions set forth in 105 CMR 100.551. Failure of the applicant to comply with the conditions may result in Department sanctions, including possible fines and/or revocation of the DoN.

1. Shields Imaging of Massachusetts, LLC shall accept the approved maximum capital expenditure of \$2,564,000 (February 2001 dollars) as the final cost figure except for those increases allowed pursuant to 105 CMR 100.751 and 752.
2. Shields Imaging of Massachusetts, LLC shall contribute 23.4% in equity (\$600,000 in February 2001 dollars) toward the final approved MCE.
3. Prior to implementation of the mobile PET service, Shields Imaging of Massachusetts, LLC will obtain a certificate of registration from the Department's Radiation Control Program.
4. Prior to implementation of the mobile PET service, Shields Imaging of Massachusetts, LLC shall secure a written agreement with a provider of radiopharmaceuticals to ensure that a reliable supply will be available for the service.



MITT ROMNEY
GOVERNOR

KERRY HEALEY
LIEUTENANT GOVERNOR

RONALD PRESTON
SECRETARY

CHRISTINE C. FERGUSON
COMMISSIONER

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Determination of Need Program
250 Washington Street, Boston, MA 02108-4619
(617) 624-5002

April 10, 2003

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

NOTICE OF PUBLIC HEALTH COUNCIL
ACTION

PREVIOUSLY APPROVED PROJECT
NUMBER 4-4886

Shields Imaging of Massachusetts, LLC
Request to Add a Fourth Host Site to the
Mobile Positron Emission Tomography
Service

Andrew S. Levine
Donoghue Barrett & Singal, P.C
One Beacon Street
Boston, MA 02108

Dear Mr. Levine:

At their meeting of April 3, 2003, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, s. 25C and the Regulations adopted thereunder to approve with condition a significant change to DoN Project No. 4-4886 filed by Shields Imaging of Massachusetts, LLC. The approval provides for the addition of Berkshire Medical Center located at 725 North Street, Pittsfield, MA as a fourth host site to the mobile Positron Emission Tomography service. One day of mobile service per month will be provided at the fourth site.

The reasons for the Public Health Council's action are as follows:

1. The Department found that pursuant to 105 CMR 100.753(A) of the Determination of Need Regulations, the significant change meets the Procedures for Significant Changes set forth at 105 CMR 100.756.
2. The Department found that after careful consideration, the comments submitted by Alliance Imaging, Inc. provided no basis for the recommendation of denial.

Shields Imaging of Massachusetts, Inc.

-2-

Project No. 4-4886

The condition accompanying this approval is as follows:

All conditions attached to the original and amended approval of Project No. 4-4886 shall remain in effect.

Sincerely,

[signature on file]

Linda Hopkins
Secretary for the Public Health Council

LH/jj

cc: Sherman Lohnes, DHCQ
Donna Allen, DHCQ
Steve McCabe, Division of Health Care Finance and Policy
Elizabeth Pressman, Division of Medical Assistance
Public File
Decision Letter File
MIS



The Commonwealth of Massachusetts
Executive Office of Health and Human Services Department
of Public Health
Determination of Need Program
250 Washington Street, Boston, MA 02108-4619
(617) 624-5002

MITT ROMNEY
GOVERNOR
KERRY HEALEY
LIEUTENANT GOVERNOR
TIMOTHY R MURPHY
SECRETARY
PAUL J. COTE, JR
COMMISSIONER

November 17, 2005

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

NOTICE OF PUBLIC HEALTH COUNCIL
ACTION
PREVIOUSLY APPROVED PROJECT
NUMBER 4-4886
Shields Imaging of Massachusetts, LLC
Request to Add a Fifth Host Site to the
Mobile Positron Emission Tomography
Service

Andrew S. Levine
Donoghue Barrett & Singal, P.C
One Beacon Street
Boston, MA 02108

Dear Mr. Levine:

At their meeting of September 27, 2005, the Commissioner and the Public Health Council, acting together (as the Department, voted pursuant to M.B.L. c. 111, s. 25C and the Regulations adopted thereunder, to approve with conditions a significant change to DoN Project No. 4-4886 filed by Shields Imaging of Massachusetts, LLC. The approval provides for the addition of the Burbank campus of HealthAlliance Hospital located at 275 Nichols Road, Fitchburg, MA as a fifth host site to the mobile Positron Emission Tomography service. One day of mobile service per week of the three days per week currently allocated to UMass Memorial Medical Center in Worcester month will be provided at the fifth site.

The reason for the Public Health Council's action is as follows:

The Department found that pursuant to 105 CMR 100.753(A) of the Determination of Need Regulations, the significant change meets the Procedures for Significant Changes set forth at 105 CMR100.756.

The condition accompanying this approval is as follows:

Shields Imaging of Massachusetts, Inc. -2- Project No. 4-4886

All conditions attached to the original and amended approval of Project No. 4- 4886 shall remain in effect.

Sincerely,

[signature on file]

Linda Hopkins
Secretary for the Public Health Council

LH/jj

cc: Sherman Lohnes, DHCQ
Jill Mazzola, DHCQ
Steve McCabe, Division of Health Care Finance and Policy
Elizabeth Pressman, Division of Medical Assistance
Public File
Decision Letter File
MIS



The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Determination of Need Program,...

2 Boylston Street, Boston, MA 02116

(617) 753-7340-

FAX (617) 753-7349

MITT ROMNEY
GOVERNOR

KERRY HEALEY
LIEUTENANT GOVERNOR

TIMOTHY R. MURPHY
SECRETARY

PAUL J. COTE, JR.
COMMISSIONER

August 9, 2006

Andrew S. Levine
Donoghue Barrett and Slingal, PC
One Beacon Street, Suite 1320
Boston, MA 02108

Re: Approved DoN Project No. 4-4886
Establish Mobile PET Service
Request for Minor Change

Dear Mr. Levine:

This is in response to your letter dated July 12, 2006, requesting a minor change to the approved DoN Project No. 4-4886 referenced above. Shields Imaging of Massachusetts, LLC, (Shields Imaging) a consortium comprised of Shields Imaging of Eastern Massachusetts, LLC, Shields Imaging of Worcester, LLC and Shields Imaging of Springfield, LLC was approved on February 5, 2002 to provide PET Services through acquisition of a mobile PET scanner and related equipment. As stated in the DoN decision letter, the services were to be provided at three host sites: Baystate Medical Center, UMass Memorial Medical Center and South Shore Hospital. These sites were subsequently licensed as three separate clinics, one for each of the consortium members and the current licensees are: Baystate MRI and Imaging Center, LLC, UMass Memorial MRI and Imaging Center, LLC and Shields Imaging of Eastern Mass, LLC.

The minor change requested in your letter of July 12 involves the deletion of Shields Imaging of Massachusetts, LLC as the provider of service for this project in order to correctly specify the individual consortium members currently licensed to provide the mobile PET services. The reason given for the minor change is that the deletion of Shields Imaging will correctly reflect the three clinics, Baystate MRI and Imaging Center, LLC; UMass Memorial MRI and Imaging Center, LLC and Shields Imaging of Eastern Mass, LLC., as the providers of services under the DoN and all subsequent amendments. Pursuant to 105 CMR 100.752 of the Determination of Need Regulations, I hereby approve the minor change to Project No.4-4886 as requested for the following reasons:

1. All criteria set forth in 105 CMR 100.751 of the Determination of Need Regulations have been satisfied.
2. The minor change involves no change in the scope of the project or maximum capital expenditure.

Please note that all terms and conditions attached to the original approval of Determination of Need Project No.4-4886 shall remain in effect.

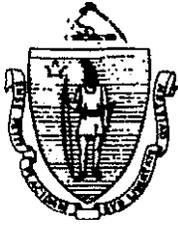
Sincerely,

[signature on file]

Joan Gorga
Director
Determination of Need Program

JMG/jmg

cc: Shennan Lohnes, DHCQ
Public File
Compliance
MIS



**The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Determination of Need Program
99 Chauncy Street, 2nd Floor, Boston, MA 02111
617-753-7340
FAX 617-753-7349**

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

JUDYANN BIGBY, MD
SECRETARY

JOHN AUERBACH
COMMISSIONER

October 13, 2011

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
NOTICE OF PUBLIC HEALTH COUNCIL ACTION
PREVIOUSLY APPROVED PROJECT NUMBER 4-4886

Andrew S. Levine
Donoghue Barrett & Singa L P.C
One Beacon Street
Boston, MA 02108

UMass Memorial: MRI and Imaging Center, LLC
Request to Add a Sixth Host Site to the
Mobile Positron Emission Tomography Service

Dear Mr. Levine:

At their meeting of October 12, 2011, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, s. 25C and the Regulations adopted thereunder to approve with condition a significant change to DoN Project No. 4-4886 filed by UMass Memorial IVIRI and Imaging Center, LLC. The approval provides for the addition of the Wing Memorial Hospital and Medical Center located at 40 Wright Street, Palmer, MA as a sixth host site to the mobile Positron Emission Tomography service. One half-day of mobile service every two weeks will be provided at the sixth site.

The reason for the Public Health Council's action is as follows:

The Department found that pursuant to 105 CMR 100.753(A) of the Determination of Need Regulations, the significant change meets the Procedures for Significant Changes set forth at 105 CMR 100.756.

The condition accompanying this approval is as follows: .

All conditions attached to the original and amended approval of Project No. 4-4886 shall remain in effect.

Sincerely,

[signature on file]

Joan M. Gorga
Director, Determination of Need

cc: Sherman Lohnes, DHCQ
Paul DiNatale, DHCQ
Steve McCabe, Division of Health Care Finance and Policy
Terri Yannetti, Division of Medical Assistance
Public File
Decision Letter File



DEVALL. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

JOHN W. POLANOWICZ
SECRETARY

LAUREN A. SMITH, MO, MPH
INTERIM COMMISSIONER

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Determination of Need Program
99 Chauncy Street, Boston, MA 02111
617-753-7340

February 14, 2013

Andrew S. Levine, Esq.
Donoghue, Barrett & Singal, P.C.
One Beacon Street, Suite 1320
Boston, MA 02108

NOTICE OF PUBLIC HEALTH COUNCIL
ACTION
PREVIOUSLY APPROVED DON #4-4886
Baystate MRI and Imaging Center, LLC.
Request for Significant Change

Dear Mr. Levine:

At their meeting of February 13, 2013, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c. 111, § 25C and the regulations adopted thereunder, to approve with conditions a significant change to approved Determination of Need ("DoN") Project Number 4-4886 of Baystate MRI and Imaging Center, LLC ("BMIC" or "Holder"). The change authorizes establishment of an additional host site for the BMIC mobile PET service at Berkshire Medical Center ("Berkshire"), 725 North Street in Pittsfield. The DoN is held jointly by BMIC, Shields Imaging of Eastern Massachusetts, LLC, and UMass Memorial MRI and Imaging Center and currently operates at South Shore Hospital in Weymouth, Baystate Medical Center in Springfield, and at three UMass Memorial Medical Center campuses in Worcester, Fitchburg, and Palmer.

As approved, the significant change will result in one day of PET services per week at Berkshire and a reduction in service at the Springfield host site from two days to one day per week. This change has an associated capital expenditure estimated at \$200,000.

The conditions accompanying this approval are as follows:

1. Upon implementation of the Berkshire Medical Center site for the mobile PET service, Baystate MRI and Imaging Center, LLC shall contribute an additional \$10,000 to fund community health initiatives in the greater Pittsfield area to be approved by the Office of Healthy Communities ("OHC") in consultation with the Community Health Network of Berkshire County (CHNA 1). BMIC shall contact OHC at least three months prior to implementation of the project to begin the planning process

Baystate MRI and Imaging Center, LLC

-2-

Significant Change to Approved
DoN Project Number 4-4886

2. All other conditions attached to the original and amended approvals of this project shall remain in effect.

Sincerely,

[signature on file]

Bernard Plovnick, Director
Determination of Need Program

cc: Steve McCabe, DHCFP
Sherman Lohnes, DHCQ
Paul DiNatale, DHCQ
Daniel Gent, DHCQ
Cathy O'Connor, OHC
Kristin Golden, Commissioner's Office



CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

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

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

October 1, 2018

Via E-mail and first class mail

Andrew Levine, Esq.
Barrett & Singal
One Beacon Street, Suite 1320
Boston, MA 02108-3106
alevine@barrettsingal.com

RE: Notice of Final Action
Project No. DoN #18080612-AM
Shields Imaging of Eastern Massachusetts, LLC (SIEM)

Dear Mr. Levine:

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 100.635(A)(3) (Amendments to a Notice of Determination of Need), I hereby approve the request for a significant change to Project #4-4886 (originally filed 02/01/2001) to add a second day of mobile MRI/PET service to South Shore Hospital (South Shore).

This approval of the request for significant amendment incorporates by reference the Memorandum to the Commissioner.

Sincerely,

A handwritten signature in cursive script, appearing to read "MBharel".

Monica Bharel, MD, MPH
Commissioner

cc: Sherman Lohnes, Director, Division of Health Care Facility Licensure and Certification
Rebecca Rodman, Deputy General Counsel
Daniel Gent, Health Care Facility Licensure and Certification
Mary Byrnes, Center for Health Information and Analysis
Stephen Sauter, MassHealth
Katherine Mills, Health Policy Commission
Eric Gold, Office of the Attorney General

Memorandum from the Commissioner

APPLICANT: UMass Memorial Imaging Center, LLC

At: Shields MRI At UMass Memorial, Shrewsbury Street
214 Shrewsbury Street
Worcester, MA, 01604

PROJECT NUMBER: UMMIC-20120208-AM (Significant Change)
DoN #4-4886.6

Filing DATE: January 26, 2021

Introduction

This memorandum presents for review and action the Determination of Need (DoN) Program's recommendation pertaining to a request by UMass Memorial Imaging Center, LLC, (a.k.a. Shields MRI At UMass Memorial Shrewsbury Street or UMMIC), located at 214 Shrewsbury Street, Worcester, MA, 01604 for a Significant Change to its previously approved DoN Project (#4-4886). As described further herein, UMMIC seeks approval to add two additional days of service for its existing approved mobile PET-CT clinic service, the Proposed Project. There are no additional gross square feet or capital expenditures requested.

This request falls within the definition for a Significant Change¹ that includes "Any change, modification, or deletion of components within a previously issued Notice of Determination of Need that is not an Immaterial Change, as determined by the Commissioner;" and will be reviewed pursuant to 105 C.M.R. 100.635(A), which requires that the proposed change falls within the scope of the original Notice of Determination of Need and is reasonable. The

¹ Significant Change means:

- (1) Any change, modification, or deletion of components within a previously issued Notice of Determination of Need that is not an Immaterial Change, as determined by the Commissioner;
- (2) Any increase or decrease in the maximum Capital Expenditure over 10% of the inflation adjusted originally approved total expenditure. An increase shall be allowed only for contingencies that could not have been reasonably foreseen, that are not reasonably within the control of the Holder, as determined by the Commissioner, and for which the inflationary adjustment contained within 105 CMR 100.310(A)(9) is not appropriate;
- (3) Any request for modification or deletion of any Standard or Other condition set forth within a Notice of Determination of Need that is determined to be material by the Department;
- (4) Unless otherwise approved by the Department, any extension of the authorization period of an approved project as specified in a Notice of Determination of Need; or
- (5) Any build-out of shell space that was subject to a Notice of Determination of Need.

Any change to a project the Commissioner deems to be so significant that it alters the previously issued Notice of Determination of Need to a degree that it constitutes a new project will require the issuance of a new Notice of Determination of Need.

Department has received no public comment on this request for Significant Change.

Background

The Proposed Project is the sixth Amendment to a DoN that was approved in 2002, project #4-4886, called Shields Imaging of Massachusetts, LLC. The original DoN, was a consortium that received Determination of Need approval to provide mobile positron emission tomography ("PET/CT") services at three host sites (Baystate Medical Center, South Shore Hospital and UMass Memorial Medical Center). The consortium was comprised of Shields Imaging of Eastern Massachusetts, LLC (for South Shore Hospital), Shields Imaging of Worcester, LLC (for UMass Memorial Medical Center), and Shields Imaging of Springfield, LLC (for Baystate Medical Center).

Amendment History

- In 2003, and 2005 the DoN was amended to add two additional host sites: Berkshire Medical Center and HealthAlliance Hospital's Burbank Campus.
- A DoN amendment was approved in 2006, to remove Shields Imaging of Massachusetts, LLC as the DoN Holder and to acknowledge the licensure of the sites as three separately licensed clinics: Baystate MRI and Imaging Center, LLC (BMIC), Shields Imaging of Eastern Massachusetts, LLC, and UMass Memorial MRI and Imaging Center, LLC ("UMMIC").
- In 2011, the DoN was again amended to add an additional host site of UMMIC at Wing Memorial Hospital and Medical Center; however, this site was not implemented.
- In 2013, an amendment was approved to add Berkshire Medical Center as a host site of the BMIC clinic.
- In 2017, the Berkshire Medical Center site was converted to a separate DoN approved joint venture known as Shields PET-CT at Berkshire Medical Center, LLC.

Currently, the three licensed clinics that now hold the approval to provide PET/CT services pursuant to Project #4-4886 are BMIC, SIEM (South Shore Hospital), and UMMIC.

The Proposed Project

Pursuant to the original DoN, UMMIC currently operates the PET/CT services at Shrewsbury on Monday and Wednesday from 7:00am to 5:30pm. Demand for PET/CT services has increased, resulting in the need for additional PET/CT capacity at this location. The existing PET/CT service is at capacity and seeks to add two days of service, Sunday and Thursday from 7:00am to 5:30pm, to accommodate increased demand for a total of four days of operation.

As PET/CT is utilized to detect and monitor high acuity and progressive diseases such as cancer,

heart disease, or neurological abnormalities, timely imaging is an essential element of the patient’s treatment plan.² The Holder reports that UMMIC’s PET-CT patient population served is growing as is the volume of scans. In 2017 it served 1,037 unique patients; in 2018 it served 1,062 unique patients; and in 2019 it served 1,368 unique patients. The site had seen 1,183 unique patients at the time of Amendment submission in 2020.

Table 1 below shows that the number of PET-CT performed, shows an average annual growth rate of 12.4%

Table 1: Annual PET-CT Volume

Year	# Scans
2017	1248
2018	1315
2019	1677
2020	1771

As a result of the increasing demand, the Applicant reports delayed access as demonstrated by the increase in the average wait time from referral to the date of the scan to 7-10 days. Accordingly, the Proposed Project seeks to meet the need for access to PET-CT for this growing patient population. The additional two days of service will decrease wait times, preventing delays in care.

UMMIC anticipates demand for PET/CT services will continue to increase as the population ages, since age is a significant risk factor for cancers.ⁱ Based on 2019 data, approximately 58.1% of its patient population is over the age of 64; and 89% are over the age of 50.

UMMIC projects the additional two days of service would result in approximately 1,846 scans in 2021; 1,994 scans in 2022; and 2,153 scans in 2023. By increasing capacity two additional days per week, UMMIC will be able to accommodate the needs of its existing patients, for whom PET/CT is an integral modality as part of their diagnosis and treatment planning, particularly for cancers.

Staff Analysis and Findings

Staff notes that with the advances in technology and expansion of payments for these procedures by Centers for Medicare and Medicaid as well as other payers, it is preferable for patients to receive their treatments closer to home as improved outcomes have been demonstrated when care is available locally. Therefore, staff finds that the Applicant has made a reasonable argument for approval of this expansion of a service that it is needed and within the scope of the original DoN approval.

² Currently, the principal diagnoses of patients needing PET/CT scans at the site are lung cancer, lymphoma, solitary pulmonary nodule, head and neck nodules, breast cancer, melanoma, cervical cancer, colorectal cancer, esophageal cancer, and prostate cancer.

Impact on Cost

The regulation requires that a Holder submit a description of the proposed change along with associated cost implications.

The Applicant states “The Proposed Project will have no cost implications to UMMIC’s patient panel. All pricing will remain consistent with current charges.”

Staff notes the following:

- This Amendment does not include any addition of infrastructure or space.
- The addition of services at an existing site would only include operating costs related to staffing, maintenance and repairs to the mobile unit.
- It will be more cost effective to operate than if placed at a new location which would require capital expense, such as constructing a concrete docking pad, establishing electrical connections for the mobile unit, as well as renovating or constructing a dedicated patient registration area.
- Further, timely access to care has the potential for cost-savings from early diagnosis to monitoring that may prevent the progression of disease which is more costly to treat.

Findings, Recommendations, and Conditions of Approval

Based upon the information submitted, the Department can find that the “the proposed change or modification falls within the scope of the Notice of Determination of Need as previously approved by the Department, and ... is reasonable” 105 C.M.R. 100.635(A) which are requirements for approval of an Amendment.

Staff finds that the Applicant has made a reasonable argument for approval of this expansion of an existing service for two additional days and that it is needed and within the scope of the original DoN approval.

With this approval of two additional days, UMMIC can operate a total of four days per week at the Shrewsbury location.

Conditions to the DoN

All conditions from the original DoN approval and subsequent Amendments remain in effect.

¹ See, e.g., Age and Cancer Risk, NATIONAL CANCER INSTITUTE, <https://www.cancer.gov/about-cancer/causesprevention/risk/age#:~:text=Advancing%20age%20is%20the%20most,cancer%20diagnosis%20is%2066%20years> (April 29, 2015).



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

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KIMBERLEY DRISCOLL
Lieutenant Governor

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Secretary

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Commissioner

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March 27, 2023

Kerry Whelan, VP of Government Affairs
UMass Memorial MRI & Imaging Center, LLC
700 Congress Street, Suite 204
Quincy, MA 02169

Via electronic mail – kerry@shields.com

Notice of Final Action: UMMIC-22122814-AM
Significant Amendment to DoN Project #4-4886

Dear Ms. Whelan,

This shall serve as notification that, based on the information provided by the Applicant and staff analysis, and pursuant to 105 C.M.R. 100.635(A), I hereby approve the application for Determination of Need (DoN) filed by UMass Memorial MRI & Imaging Center, LLC (Applicant) to add three additional days of service at the 214 Shrewsbury Street, Worcester, MA, 01604. There are no additional gross square feet or capital expenditures requested.

Based upon a review of the materials submitted the Department found that this request falls within the definition of Significant Change that includes " ... Any change, modification, or deletion of components within a previously issued Notice of Determination of Need that is not an Immaterial Change" and that the proposed change is both within the scope of the Notice of Determination of Need and is reasonable. This Notice of Final Action incorporates by reference the Application, and the Memorandum to the Commissioner.

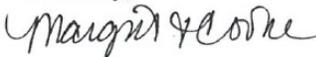
Under 100.635(A) " ... Final Actions may include additional terms and Conditions to be attached to the Notice of Determination of Need." This approval is conditioned as described in the Memorandum, a copy of which is attached hereto and made a part hereof. All other conditions in DoN Project #4-4886 remain in effect.

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 include a written attestation of participation or intent to participate in MassHealth.

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.

Please notify the DoN Program at DPH.DON@State.MA.US of the anticipated completion date of all the components of the DoN-approved Project once it has been established. Additionally, send an email confirming the Project's completion (licensure/ amended licensure approval date) and the first day of operations to determine the annual DoN reporting timeline.

Sincerely,



Margret Cooke
Public Health Commissioner

cc:
Dennis Renaud, Director Determination of Need Program
Elizabeth Kelley, Director Bureau of Health Care Safety and Quality
Rebecca Rodman, General Counsel
Stephen Davis, Director, Division of Health Care Facility Licensure and Certification
Judy Bernice, Division of Health Care Facility Licensure and Certification
Daniel Gent, Health Care Facility Licensure and Certification
Samuel Louis, Office of Health Equity
Jennica Allen, Division of Community Health Planning and Engagement
Elizabeth Maffei, Division of Community Health Planning and Engagement
Katelyn Teague, Division of Community Health Planning and Engagement
Elizabeth Almanzor, Center for Health Information Analysis
Katherine Mills, Health Policy Commission
Sandra Wolitzky, Office of the Attorney General
Tomaso Calicchio, Executive Office of Health and Human Services
Hai Nguyen, Executive Office of Health and Human Services
Karina Mejias, Executive Office of Health and Human Services
Priscilla Portis, Executive Office of Health and Human Services



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: Original Application Date:

Applicant Name:

Application Type:

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:

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		01/22/2026
Name:	Signature:	Date

This document is ready to print: Date/time Stamp:



DEBORAH DEVAUX
CHAIR

The Commonwealth of Massachusetts

HEALTH POLICY COMMISSION

50 MILK STREET, 8TH FLOOR
BOSTON, MASSACHUSETTS 02109
(617) 979-1400

DAVID M. SELTZ
EXECUTIVE DIRECTOR

December 19, 2025

Dr. Brian Banker
Baycare Health Partners, Inc.
1414 Main Street, Suite 1710
Springfield, MA 01144

RE: ACO LEAP Re-Certification

Dear Dr. Banker:

Congratulations! The Health Policy Commission (HPC) is pleased to inform you that Baycare Health Partners, Inc. meets the requirements for ACO Certification under our Learning, Equity, and Patient-Centeredness (LEAP) standards. This certification is effective from January 1, 2026, through December 31, 2027.

The ACO Certification program, in alignment with other state agencies including MassHealth, is designed to accelerate care delivery transformation in Massachusetts and promote a high quality, efficient health system. ACOs participating in the program have met a set of objective criteria focused on core ACO capabilities demonstrating dedication to patient-centered care, use of evidence-based and data-driven strategies to improve care delivery, and commitment to addressing long-standing health inequities. Baycare Health Partners, Inc. meets those criteria.

The HPC will promote Baycare Health Partners, Inc. as a Certified ACO on our website and in our marketing and public materials. Enclosed you will find an ACO Certification logo for your organization to use in accordance with the attached Terms of Use. We hope you will use the logo on promotional materials when you highlight your ACO Certification to your patients, payers, and others.

The HPC looks forward to your continued engagement in the ACO Certification program over the next two years.

Thank you for your dedication to providing accountable, coordinated health care to your patients, and to continued learning and improvement over time. If you have any questions about this letter or the ACO Certification program, please do not hesitate to contact Courtney Anderson, Senior Manager, at HPC-Certification@mass.gov.

Best wishes,

A handwritten signature in blue ink that reads "David Seltz".

David Seltz
Executive Director