

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC HEALTH

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PUBLIC HEARING VIA CONFERENCE CALL :
RE: :
:
Determination of Need application :
materials received by the Department :
of Public Health for Shields :
Healthcare of Cambridge, Inc. - :
DoN-Required Equipment, Filed 3/1/22. :
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BEFORE:

Hearing Officer Elizabeth Kelley, Director
Bureau of Healthcare Safety and Quality

(All Participants Appeared by Conference Call)

6:04 p.m.

Tuesday, May 24, 2022

(Alexander K. Loos, Registered Diplomate Reporter)

* * * * *

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1 P R O C E E D I N G S

2 THE MODERATOR: Welcome, and thank you for
3 standing by.

4 All participants will be on a listen-only
5 mode until we open the lines to speak. At that
6 time, if you would like to speak, you may press Star
7 1.

8 Today's conference is being recorded. If
9 you have any objections, please disconnect at this
10 time.

11 I would like to now turn your conference
12 over to Elizabeth Kelley.

13 Thank you. You may begin.

14 HEARING OFFICER KELLEY: Thank you, Julie.

15 Good evening. My name is Elizabeth Kelley,
16 and I am the Director of the Bureau of Healthcare
17 Safety and Quality of the Massachusetts Department
18 of Public Health, and I'm here tonight representing
19 the Determination of Need Program.

20 Before we begin, we would like to take just
21 a moment to acknowledge the tragedy in Texas today,
22 and we will be proceeding with the hearing but
23 wanted to -- just to pause to acknowledge what's
24 happening -- happening in Texas and take a moment.

1 (Pause)

2 For this evening, we are here to take
3 testimony in a Determination of Need application.
4 For clarification, you will hear me refer to
5 Determination of Need Program as the "DoN" program,
6 and the Department of Public Health as the "DPH."

7 Joining me today from the Department, my
8 colleague, Nazmim Bhuiya.

9 This hearing has been called pursuant to an
10 application submitted by Shields Healthcare of
11 Cambridge, Incorporated, who we will refer to as
12 "the applicant" or "Shields" moving forward.

13 Upon receipt of the application, DoN staff
14 reviewed the application; and after finding it to be
15 in compliance with the DoN statute and regulation
16 for filing, assigned it a filing date of March 1,
17 2022. Again, this application is for Shields
18 Healthcare of a Cambridge, Inc. The enabling
19 statute for the DoN program requires that any person
20 or government agency intending to add DoN-required
21 equipment, as defined in DoN regulation and
22 guidance, must apply for DoN before engaging in such
23 a project.

24 The Shields project:

1 The DoN application is for a project
2 located at Shields MRI Brighton at 385 Western
3 Avenue in Brighton, Massachusetts, for a 1.5 Tesla
4 magnetic resonance imaging, or MRI unit. The total
5 value of the proposed project based on the maximum
6 capital expenditure is \$2,292,401.

7 This public hearing is an effort to gather
8 information and hear the opinions of interested
9 parties about the proposed projects. It is not
10 intended to be a question-and-answer session. No
11 questions will be permitted.

12 The DoN program will take all relevant
13 information into account in preparing its
14 recommendation to the Massachusetts Public Health
15 Council, whose decision on whether to approve the
16 DoN for the proposed project will be made at one of
17 its upcoming monthly meetings.

18 We will accept written comments on this
19 application for ten days following this hearing.

20 As this is a virtual hearing, the logistics
21 are different from in-person hearings. I'll review
22 our process for today.

23 We are using a moderated conference line,
24 so our moderator, Julie, will manage the queue for

1 speaking.

2 This meeting is being recorded and
3 transcribed. As indicated in the notice for the
4 meeting, please press Star 1 if you would like to
5 speak. This will put you in the queue.

6 You will not be told where you are in the
7 queue, nor will you get much notice that you are
8 about to testify. When it is your turn, you will be
9 told you are now the speaker and will experience a
10 short silence and then will be the speaker. If
11 you've muted your phone, you may need to unmute.

12 Please begin by stating your name and
13 either affiliation or town of residence. Please
14 speak clearly so that our transcriber can record
15 everything accurately. We ask that you limit
16 testimony to approximately three minutes.

17 If you have a written copy of your remarks,
18 regardless of length, please feel free to submit it
19 to the Department via e-mail or by the postal
20 service. We can be e-mailed at dph.don@state.ma.us,
21 and that's also available on the mass.gov website.
22 Postal mail will get to us more quickly if it's sent
23 to: Determination of Need, Massachusetts Department
24 of Public Health, 67 Forest Street, Marlborough

1 Massachusetts 01752. Again, also available on the
2 website.

3 Be assured that the Department will
4 consider all comments, whether presented orally or
5 in writing. Whether you comment or not, please know
6 that the Department greatly values and appreciates
7 your participation in the DoN process.

8 Before we open the line to the general
9 public, the applicant will go first, and will be
10 allotted four minutes to present information about
11 the proposed project.

12 I will now ask Carmel Shields, executive
13 vice-president, Shields Healthcare Group,
14 representing Shields Healthcare Cambridge, Inc., to
15 talk about the project. After she is done, the
16 moderator will unmute the first speaker.

17 MS. SHIELDS: Shall I begin?

18 HEARING OFFICER KELLEY: Please do.

19 Thank you.

20 MS. SHIELDS: Thank you. Yes.

21 And our thoughts and prayers are with those
22 in Texas.

23 Good evening. My name is Carmel Shields,
24 and I am an executive vice-president of Shields

1 Healthcare Group.

2 I would like to express my appreciation to
3 the Department of Public Health for providing me the
4 opportunity to briefly highlight our application to
5 add a second licensed MRI unit at the clinic at 385
6 Western Ave.

7 By way of background, Shields was founded
8 in Brockton 1972 by Tom and Mary Shields and opened
9 the Commonwealth's first independent regional MRI
10 center in 1986. Over the next 36 years, Shields has
11 come to manage 40 MRI and PET-CT facilities
12 throughout New England. We remain a family-owned
13 and operated healthcare provider focused on
14 high-quality, affordable outpatient care.

15 Through the proposed project, Shields seeks
16 to support the unique needs of its patient panel by
17 offering enhanced access to high-value, freestanding
18 imaging services.

19 At present, our Allston-Brighton clinic
20 operates a Hitachi Oasis 1.2T unit which is the
21 first open-sided freestanding MRI unit in Boston and
22 one of only a handful of similar units in the
23 Greater Boston region. The 1.2 unit provides
24 tremendous value for claustrophobic and bariatric

1 patients and for those who self-identify as having
2 severe anxiety.

3 It has been our learned experience, and
4 confirmed by national providers, to successfully
5 scan this particular patient population results in
6 longer scan times. Thus, the Hitachi unit is
7 currently operating at approximately 85 percent
8 capacity.

9 Based on the modeling of current and future
10 demand for high-value imaging services in an aging
11 population, the applicant respectfully contends that
12 the Allston-Brighton clinic will require a second
13 licensed unit to meet the growing needs of its
14 patient panel.

15 Specifically the University of
16 Massachusetts Donahue Institute projects the
17 Commonwealth's largest population growth will be
18 attributed to residents within the 50-plus age
19 cohort. The patient panel served by the
20 Allston-Brighton clinic skews older than the general
21 population. For example, the Commonwealth's average
22 age is 39; the MRI patient panel is, on average,
23 47 years old, and the 60-plus age cohort makes up
24 approximately 31 percent of the total patient panel.

1 Currently, the most frequently scanned
2 areas of the body at our Alston-Brighton site
3 include the brain, upper and lower extremities, and
4 lumbar. Furthermore, data from the advisory board
5 shows freestanding MRI volume is expected to grow
6 6. -- 16.6-plus percent within a five-mile radius of
7 the Allston-Brighton clinic over the next five
8 years.

9 Through the proposed project, Shields seeks
10 to relicense the Siemens Espree 1.5T MRI unit that
11 is currently housed, but not operational, at this
12 location.

13 The gold standard for MRI imaging in a
14 clinical setting includes a 1.5T high-field MRI
15 scanner. A 1.5 machine produces faster scan times
16 than lower-strength units, and it is ideal for
17 abdomen, prostate, breast and chest scans.

18 As a result of the proposed project, the
19 total patient panel will have enhanced access to
20 higher quality, low-cost, convenient MRI imaging in
21 their community, and patients in need of breast
22 scans will be able to once again receive them at a
23 clinic.

24 The proposed project supports both the

1 Commonwealth's goal of containing the rate of growth
2 of total medical expense and the findings of the HPC
3 variation in imaging spending report, which found
4 that prices can be twice as high when MRIs are
5 performed at hospitals, outpatient, or other
6 facilities.

7 It is for these reasons I respectfully
8 request the Department of Public Health look
9 favorably -- look favorably upon this application.

10 Thank you for your time and attention.

11 HEARING OFFICER KELLEY: Thank you.

12 We will now open the lines for speakers.

13 As a reminder, please press Star 1 if you
14 would like to speak. And when you begin to speak,
15 please state clearly your name. And please actually
16 spell your name; that will help our transcriber
17 accurately get your -- get your name.

18 So Julie, I think we're ready for the first
19 speaker.

20 THE MODERATOR: Thank you.

21 As a reminder, if you would like to speak,
22 please press Star 1. If you would like to remove
23 your line, it is Star 2. Once again, to open your
24 line to speak it is Star 1.

1 Our first comment comes from Anthony
2 Lasala.

3 Your line is open.

4 MR. LASALA: Thank you.

5 My name is Anthony Lasala. That's
6 L-a-s-a-l-a. I currently serve as a regional
7 business director overseeing five locations for
8 Shields.

9 I have been with Shields since graduating
10 Mass. College of Pharmacy and Health Sciences in
11 2012, and I have worked at both outpatient-only and
12 hospital locations. My roles grew from staff tech,
13 lead tech, chief tech to now being a director of
14 operations. I also spent a short time on the sales
15 and marketing team to help strengthen my knowledge
16 of the referring community.

17 Thank you for the opportunity to show my
18 support for Shields Healthcare and their application
19 for a second MRI in Brighton. The proposed project
20 will provide a better patient experience, reduce
21 wait times, and provide for specialty patient scans
22 through optimizing the use of both machines.

23 Being so close to Boston, our Brighton
24 location is lucky enough to accommodate the needs of

1 many different types of patients. These patients
2 range from those who are seeking annual follow-ups,
3 to those -- to those who have recently experienced
4 an injury that may require further treatment, to
5 local college and professional athletes who are
6 seeking time-sensitive care in order to map out
7 their treatment planning to get them back to full
8 competition, and everything in between.

9 At this point, the community need for care
10 is beginning to encumber the capability of a
11 one-magnet center. Our goal is to be available for
12 all patients without the need of unnecessary
13 triaging that could result in patient care being
14 delayed. Moreover, with the continued influx of
15 claustrophobic patients, it is important for us to
16 be able to continue offering a quick turnaround for
17 the referring community so that each patient has an
18 opportunity to be seen quickly and comfortably,
19 allowing their medical team to provide the necessary
20 treatment as soon as possible.

21 The addition of the Siemens Espree to this
22 location will allow us to do just that: Offer more
23 availability and more flexibility to accommodate the
24 increased demand of MRI services within the Greater

1 Boston region.

2 I respectfully request that the Department
3 of Public Health approve this application as to
4 allow for more patients like myself to receive
5 high-quality care at an affordable price.

6 Thank you.

7 HEARING OFFICER KELLEY: Thank you.

8 I think we're ready for our next speaker.

9 THE MODERATOR: Our next comment comes from
10 Michael Croke.

11 Your line is open.

12 MR. CROKE: Good evening.

13 My name is Michael Croke -- last name
14 spelled C-r-o-k-e -- and I appreciate the
15 opportunity to speak tonight in support of the
16 Shields Healthcare application for a second MRI unit
17 at the freestanding facility located in
18 Allston-Brighton.

19 For the past five years, I have served in
20 various healthcare-related roles with patient care,
21 revenue cycle, and most recently as a business
22 development analyst for Shields Healthcare Group.

23 Before Shields installed the new Hitachi
24 open MRI in 2020, claustrophobic patients in Suffolk

1 and Middlesex Counties were severely limited with
2 available options to access a true open-bore MRI.
3 By the end of 2021, Shields provided over 570 new
4 claustrophobic patients with the opportunity to
5 access care that was previously unobtainable,
6 preventing significant delays in diagnoses.

7 Over the next five years, the
8 claustrophobic patient population is anticipated to
9 continue to grow, and Shields will need to relicense
10 the Espree 1.5T unit to accommodate the demand of
11 patients that cannot typically complete scans on a
12 regular 1.5 or 3T unit.

13 Claustrophobics -- claustrophobic patients
14 also typically require additional time to complete
15 their scans, with routine scans in 2021 on the
16 Hitachi unit completed on average in 40 minutes and
17 contrast exams completed closer to 55. This has
18 increased lead times for access at the facility. By
19 relicensing the Espree unit, which is the gold
20 standard for MRI imaging in a clinical setting,
21 Shields will be able to shift scans of patients that
22 are more clinically appropriate to be done on a 1.5T
23 magnet away from the Hitachi unit. This will allow
24 for better image quality and increased capacity for

1 a vulnerable claustrophobic patient population to
2 access the Hitachi unit that is operating near full
3 capacity after completing 4300 scans in 2021.

4 The addition of a second MRI unit is also
5 in line with the state's cost containment goals.
6 According to the -- to HPC's variation in spending
7 report, the price of a service when performed at a
8 HOPD setting is twice as high as one done at a
9 freestanding location, such as the Allston-Brighton
10 facility. Increasing the accessibility to
11 affordable, lower-price options at a freestanding
12 facility will help patients access care that could
13 be either delayed or forgone due to financial
14 distress from the pandemic and a rising inflation
15 rate. The relicensure of the Espree unit will help
16 patients receive high-quality, affordable care away
17 from a HOPD setting.

18 For these reasons, I respectfully request
19 the Department of Public Health approve this
20 application.

21 Thank you.

22 HEARING OFFICER KELLEY: Thank you.

23 THE MODERATOR: Our next comment comes from
24 Jonathan Joyner.

1 Your line is open.

2 MR. JOYNER: Good evening.

3 My name is Jonathan Joyner, last name
4 spelled J-o-y-n-e-r. Thank you for the opportunity
5 to share my support for Shields Healthcare's DoN
6 application for a second MRI at its freestanding MRI
7 location in Brighton.

8 For over ten years, I have served in
9 various marketing intelligence and business planning
10 roles in the Massachusetts healthcare market, most
11 recently as director of corporate development for
12 Shields Healthcare Group.

13 In the winter of 2020, Shields identified
14 an unmet need for the claustrophobic population in
15 Greater Boston. Shields invested in the new Hitachi
16 1.2T open MRI to offer new -- a new point of access
17 for a population that was previously unable to
18 receive critical diagnostic care. Prior to 2020,
19 claustrophobic patients in the Greater Boston area
20 only had one other option within a 50-mile radius.

21 By way of context, the Hitachi 1.2T offers
22 advanced imaging technology in a sandwich-style
23 format rather than the traditional cylindrical bore,
24 thus greatly enhancing patient comfort and ability

1 to complete the scan.

2 By the end of 2021, the Brighton location
3 saw 570 new patients that had self-identified as
4 claustrophobic, and the demand for this critical
5 service continues to grow. A recent study published
6 by psychological medicine determined that
7 2.2 percent of any given population experiences
8 claustrophobia, equating to over 28,000
9 claustrophobic patients living within the Brighton
10 center's primary service area, further demonstrating
11 ample need for the service.

12 Notably, our -- after our first year of
13 operation, we have observed that scan times for this
14 population are up to 50 percent longer than the
15 non-claustrophobic patients, therefore limiting
16 machine capacity. In FY21, the Hitachi scanned 4300
17 patients, operating at 85 percent utilization.
18 Following projections for this center suggests 7600
19 patients within the next five years.

20 Given current and anticipated demand, a
21 single magnet cannot accommodate this need. A
22 second magnet would offer the ability for the
23 Hitachi to focus primarily on meeting the need of
24 this claustrophobic population.

1 Lastly, it is important to note that the
2 Shields retains a still technologically viable 1.5
3 Siemens Espree at this location, thus negating the
4 additional expense to acquire a new machine, a cost
5 which would normally be passed along to patients.

6 In the same vein, the proposed second MRI
7 would remain on a freestanding rate structure across
8 both government and commercial payers. This is an
9 important point as the Health Policy Commission's
10 report on variation in imaging spending illustrates
11 that prices vary significantly based on site of
12 service, with hospital outpatient departments
13 costing members of the Commonwealth twice as much
14 for the same service offered at a freestanding
15 location.

16 For these reasons, I respectfully request
17 that the Department of Public Health approve this
18 application.

19 Thank you.

20 HEARING OFFICER KELLEY: Thank you.

21 THE MODERATOR: Our next comment comes from
22 Julie Glassman.

23 Your line is open.

24 MS. GLASSMAN: Hello, and good evening.

1 My name is Julie Glassman, and my last name
2 is spelled G -- as in "goal" -- l-a-s-s-m-a-n. I
3 appreciate the opportunity to share my support for
4 Shields Healthcare's recent application for a second
5 MRI unit located at its freestanding MRI center in
6 Brighton.

7 I am currently employed as the director of
8 patient care at Shields Healthcare Group and have
9 been with the organization for 14 years.

10 The proposed project will provide a better
11 patient experience, reduce wait times and provide
12 speciality patient scans through optimizing the use
13 of both machines: One catering to the
14 claustrophobic patient population; and the other a
15 1.5 unit, which is the gold standard for MR imaging
16 in a clinical setting. This project will also
17 restore and/or increase access to high-quality MR
18 imaging services in the community. As a result,
19 Shields MRI Brighton expects that patients will be
20 more likely to seek and comply with treatment if
21 they do not experience significant delays in
22 diagnosis.

23 I respectfully request that the Department
24 of Public Health approve this application. Approval

1 of this request will allow for more patients like
2 myself to receive high-quality care at an affordable
3 price.

4 Thank you for your time tonight.

5 HEARING OFFICER KELLEY: Thank you.

6 THE MODERATOR: Our next comment comes from
7 Nicholas Elia.

8 Your line is open.

9 MR. ELIA: Good evening, everyone.

10 My name is Nicholas Elia, spelled E-l-i-a,
11 and I appreciate the opportunity to share my support
12 for Shields Healthcare's recent application for a
13 second MRI unit located at its freestanding center
14 in the Brighton-Allston area.

15 I currently serve as a senior business
16 development analyst for Shields Healthcare Group and
17 have been in this role for the past two years and
18 with the organization for the past five years.

19 In 2020, Shields installed a new Hitachi
20 1.2T open MRI unit at the center. This is due to an
21 unmet need for claustrophobic patients, primarily in
22 Suffolk and Middlesex Counties, in the limited
23 options of true open-bore units in these markets.
24 In 2021, the location saw 570 new claustrophobic

1 patients, in addition to the existing claustro
2 patient panel being scanned. These numbers are
3 expected to Grow significantly over the next five
4 years within the center's service area,
5 demonstrating the initial need for the unit.

6 Since the 1.2T has been operational, scan
7 times have increased, compared to historical
8 numbers, as more time is needed to accommodate these
9 claustrophobic patients. The addition of the
10 Siemens Espree 1.5T unit to the center will free up
11 volume backlog currently seen on the 1.2T due to
12 these longer scan times and will accommodate all
13 patient needs from a scheduling and wait time
14 perspective.

15 The addition of a second magnet will also
16 help accommodate non-claustrophobic patients who are
17 better suited to be scanned on the 1.5T, as there is
18 a subset of scans that are clinically more
19 appropriate. These includes once such as abdomen,
20 pelvis, breast, prostate, chest and MR-CT scans.

21 Finally, the addition of a second magnet at
22 the center will contribute to the state's cost
23 containment goal, as patients being scanned there
24 will be billed on a freestanding rate structure.

1 This is massive cost savings advantage for patients
2 who reside in the area and resonates with the HPC's
3 report on variation in imaging spending.

4 For all these reasons, I respectfully
5 request that the Department of Public Health approve
6 this application.

7 Thank you for your time.

8 HEARING OFFICER KELLEY: Thank you.

9 THE MODERATOR: Our next comment comes from
10 Edmond Ehemey. Your line is opened.

11 Edmond, please hit your mute button. Your
12 line is open.

13 MR. EHEMEY: Sorry. I put Evan.

14 THE MODERATOR: I'm sorry, Evan. I
15 apologize.

16 MR. EHEMEY: That's all right.

17 THE MODERATOR: I didn't get your recording
18 very clear. Sorry.

19 MR. EHEMEY: That's okay.

20 Hi. My name is Evan Ehemey. The last name
21 is E-h-e-m-e-y. I appreciate the opportunity to
22 share my support for Shields Healthcare of
23 Cambridge's DoN application for a second MRI at its
24 freestanding center in Brighton.

1 I'm here today both as a previous patient
2 and employee of Shields Healthcare Group. As a
3 prior patient, I was cared for at the Brighton MRI
4 center on three separate occasions and was very
5 pleased with the high-quality and high-value care I
6 received.

7 The proposed project seeks to implement the
8 gold standard of MR images, a 1.5 Tesla high-field
9 MRI scanner, which means that it can produce
10 higher-quality images in less time. The proposed
11 project will also restore and/or increase the access
12 to high-quality MR imaging services in the community
13 and, as a result, the Shields MRI Brighton expects
14 that patients like me will be more likely to comply
15 with treatment if they don't have to experience
16 delays in diagnosis.

17 Approval of this request will allow more
18 patients like myself to receive high-quality care at
19 an affordable price. I respectfully request that
20 the Department of Public Health approve this
21 application.

22 Thank you.

23 HEARING OFFICER KELLEY: Thank you.

24 THE MODERATOR: Our next comment comes from

1 Victoria Gomes.

2 Your line is open.

3 MS. GOMES: Thank you.

4 Hi, everyone.

5 My name is Victora Gomes, G-o-m-e-s. I
6 appreciate the opportunity to share my support for
7 Shields Healthcare's application for a second MRI at
8 its freestanding MRI center in Brighton.

9 And I am currently working as a Boston
10 territory sales representative for Shields
11 Healthcare Group. I've been in the role for the
12 past year and a half, and I've also held roles in
13 marketing and patient care throughout my six years
14 with Shields.

15 When Shields installed the new Hitachi
16 1.2 Tesla open MRI in 2020, I was just starting my
17 role in sales and was able to see the impact it made
18 on the patient community from a unique perspective.
19 This truly made a world of difference for our
20 claustrophobic patients who otherwise would not be
21 able to have their scans performed.

22 However, because they were seeing an
23 increased volume of anxious and claustrophobic
24 patients, this resulted in our team having to adjust

1 scan and prep times, therefore decreasing the number
2 of available slots for other routine patients.

3 Our Brighton facility is conveniently
4 located right outside of the city and only minutes
5 away from several large colleges and universities.
6 We have built strong relationships with many of them
7 and work together to get their students and faculty
8 the scans they need.

9 From what we've seen, the majority of the
10 younger population of our patients do not experience
11 the same anxiety and claustrophobia that others
12 coming into Brighton for their scans do; and,
13 therefore, they would benefit from being scanned on
14 the 1.5 Tesla Espree.

15 The proposed project will provide a better
16 patient experience, reduce wait times, and provide
17 for specialty patient scans through authorizing the
18 use of both machines.

19 I respectfully request that the Department
20 of Public Health approve this application.

21 Thank you.

22 HEARING OFFICER KELLEY: Thank you.

23 THE MODERATOR: Our next comment comes from
24 Dr. Stephen Sweriduk.

1 Your line is open.

2 DR. SWERIDUK: Thank you, and good evening.

3 My name is Dr. Stephen Sweriduk,
4 S-w-e-r-i-d-u-k. I've served as the medical
5 director of Shields Healthcare for the past
6 34 years. The following comments are in support of
7 the DoN application for the Shields Brighton
8 location reactivation of the 1.5 Tesla MRI machine.

9 As stated by the previous speakers, it's
10 clear that routine MRI scans performed on bariatric
11 and claustrophobic patients are best imaged using
12 the 1.2 Tesla Fuji open-sided MRI system.

13 However, I would like to touch on a few
14 indications that only be imaged on a high-field open
15 1.5 Tesla system:

16 First of all, we'll discuss implanted
17 devices. More and more patients who need MRI scans
18 have implants that require special imaging
19 parameters and stringent testing for safety.
20 However, there has been no testing of these implants
21 on the 1.2 Tesla Fuji (sic) MRI machine, so many
22 patients with implanted devices cannot be safely
23 scanned on the 1.2 Tesla Fuji, including the
24 patients with pacemakers, programmable brain shunts

1 and nerve stimulators, as well as drug delivery
2 devices.

3 We also perform advanced neurological
4 applications much better on the 1.5 Tesla system.
5 High-field MRI is necessary for 3D imaging for
6 quantitative analysis of multiple sclerosis plaques,
7 for determining brain volume for dementia patients,
8 as well as using diffusion tensor imaging for
9 patients with brain tumors.

10 MRI has also become a critical tool for
11 treating and diagnosing patients with prostate
12 cancer. High-field MRI in this quality is necessary
13 for prostate cancer detection, staging, and lesion
14 localization for biopsy planning.

15 Abdominal imaging is also much better
16 performed on the 1.5 Tesla system. When we perform
17 MRI scans of the liver, we use high-field dynamic
18 MRI studies, and we can't do that on the 1.2 Tesla
19 system. We can only -- we can only perform those
20 studies on the 1.5 Tesla system. And we do that
21 basically to determine -- to evaluate and
22 characterize liver lesions which are found on
23 routine CT and ultrasound studies.

24 So for these reasons, I would respectfully

1 ask that you consider our application, and I thank
2 you for allowing me to speak.

3 HEARING OFFICER KELLEY: Thank you.

4 THE MODERATOR: Our next comment comes from
5 Brad Field.

6 Your line is open.

7 MR. FIELD: Good evening.

8 My name is Brad Field, F-i-e-l-d. I am the
9 center manager and chief technologist for the
10 Shields MRI Western Ave. Center with Shields
11 Healthcare.

12 Before joining Shields, I trained in MRI at
13 Mass. General Hospital from 1984 to 1986. I joined
14 Shields in late 1986 and assisted in opening the
15 first DPH-licensed outpatient imaging center. I
16 have greatly valued spending the past 36 years as a
17 career with them. I also serve as a protocol
18 manager for Shields MRI with the responsibility of
19 overseeing the imaging protocols for the network.

20 I appreciate the opportunity to share my
21 support for this DoN application to add a second MRI
22 at Shields' freestanding MRI center in Brighton.

23 I would like to outline the differences
24 from a patient perspective between the currently

1 operational Hitachi Oasis and the conventional 1.5T
2 imager like the Siemens Espreee.

3 The Hitachi was purchased and installed to
4 provide access to high quality MRI imaging to
5 claustrophobic and bariatric patients who otherwise
6 could not be imaged in conventional bore imagers.
7 Unique to the Hitachi, it is the only high-field
8 scanner which provides a horizontally wide-open
9 patient experience. Several patients who have
10 previously been imaged on our conventional scanners
11 have sought out the Hitachi in hopes of overcoming
12 their claustrophobia.

13 Though Hitachi has provided an improved
14 patient experience for claustrophobics and
15 bariatrics, there are some scans that are more
16 suitable for the traditional 1.5T Espree.

17 For example, we are currently unable to
18 image patients with active implants, such as pumps,
19 bone growth and neural stimulators, cardiac
20 pacemakers and other active implants. FDA requires
21 that manufacturers test their devices for MRI
22 safety. They all perform this testing on the
23 horizontal field imagers and develop conditional
24 statements which have to be met to image these

1 patients safely. We are not aware of any
2 manufacturer who has performed this testing in a
3 vertical magnetic field; therefore, we cannot
4 perform imaging on any of these patients on our
5 Oasis.

6 Additionally, there are certain scans that
7 are more clinically appropriate on the 1.5T. These
8 include examinations of the pancreas. We do not
9 visualize this organ well enough on the 1.2 Oasis.
10 We are not scanning MR enterography. The diffusion
11 and post-contrast imaging is not diagnostic enough
12 on the Oasis. Certain examinations of the pelvis,
13 such as prostate examinations, require 1.5T to
14 provide adequate imaging for these studies.
15 Furthermore, the coil designs, to work with the
16 vertical fields, are suboptimal compared to designs
17 that have been perfected to work on traditional
18 scanners.

19 In our service area of Greater Boston, most
20 instances where patients are not a candidate for the
21 Hitachi require them to have more expensive and less
22 convenient hospital-based imaging. We at Shields
23 are committed to providing each patient with a
24 high-quality, affordable examination that best meets

1 their unique needs. Reopening the Espree 1.5T will
2 allow us to continue to live up to our commitment.

3 It is for these reasons I respectfully
4 request the Department of Public Health approve this
5 application.

6 Thank you.

7 HEARING OFFICER KELLEY: Thank you.

8 THE MODERATOR: Our next comment comes from
9 Dr. Tiron Pechet.

10 Your line is open.

11 DR. PECHET: Hi. Good evening.

12 My name is Dr. Tiron Pechet. I'm going to
13 spell that. First name is T-i-r-o-n; last name is
14 P -- as in "Peter" -- e-c-h-e-t. I currently serve
15 as assistant medical director and chief medical
16 information officer at Shields Healthcare. Before
17 joining Shields, I attended Harvard College and
18 Harvard Medical School and completed my training at
19 Newton-Wellesley Hospital and Lahey Clinic. I
20 joined Shields in 1996.

21 I appreciate the opportunity to share my
22 support for this DoN application to add a second MRI
23 at Shields' freestanding MRI center in Brighton.

24 I would like to outline the clinical

1 differences and similarities between the currently
2 operational Hitachi Oasis and the industry-standard
3 1.5T machines, like the Siemens Espree.

4 The Hitachi was purchased and installed to
5 give high-quality medical care and access to a class
6 of patients who, for the reason of claustrophobia,
7 were unable to tolerate examination in conventional
8 MRI systems, and whom were, therefore, generally
9 unable to access diagnostic information from MRI.

10 This has been very successful and now we can serve
11 the needs of many more claustrophobic and bariatric
12 patients in an outpatient setting.

13 However, the physics of allowing the size
14 of a magnet to be open require trade-offs that
15 result in some areas of relative deficit with
16 respect to a machine like the Espree.

17 Time: Examinations take longer in the
18 Oasis. This is because of a combination of lower
19 field strength and differences in the design related
20 to the vertical field of the magnet as opposed to
21 the horizontal field of a conventional MR system.
22 For example, examinations on the Espree are roughly
23 50 percent longer -- excuse me, examinations are
24 roughly 50 percent longer on the Hitachi as opposed

1 to the Espree.

2 And quality: While many examinations have
3 equivalent diagnostic quality to examinations
4 performed on a conventional machine, albeit while
5 taking longer, there are some that, for technical
6 reasons, are frankly not as good. While we offer
7 these examinations to patients for whom it's their
8 only choice, we do not offer those to
9 non-claustrophobic patients whose needs are better
10 served in a magnet of conventional design, like the
11 Espree. These examinations include many
12 examinations of the chest and abdomen, prostate
13 imaging, breast imaging, examinations of the vessels
14 called angiography, examination on a growing patient
15 population with implants that are not compatible
16 with the unique design of the Oasis.

17 The Hitachi is a very good machine, but
18 it's a special-purpose magnet meant to expand our
19 ability to serve -- to provide high-quality MRI to
20 an underserved segment of the patient population.
21 By reopening the Espree, we will be able to provide
22 each patient with the examination that best matches
23 their unique needs and to provide the optimum
24 quality images in the lowest amount of time for that

1 particular patient.

2 I respectfully request the Department of
3 Public Health to approve this application.

4 Thank you.

5 HEARING OFFICER KELLEY: Thank you.

6 THE MODERATOR: Our next comment comes from
7 Brittany Arseneault.

8 Your line is open.

9 MS. ARSENEAULT: Good evening, everyone.

10 My name is Brittany Arseneault. That's
11 A-r-s -- as in "Samantha" -- e-n-e-a-u-l-t. And I
12 appreciate the opportunity to share my support for
13 Shields Healthcare's recent application for a second
14 MRI unit located at its freestanding MRI center in
15 Brighton.

16 I currently serve as a PTR manager for the
17 Boston and northern region for Shields Healthcare
18 Group. I have been in this role for the last two
19 years and have held different clinical and
20 administrative roles in the organization for a total
21 of nine years.

22 The Brighton MRI center has been designated
23 a Diagnostic Imaging Center of Excellence by the
24 American College of Radiology. The Diagnostic

1 Imaging Center of Excellence program is the pinnacle
2 of medical imaging care and an achievement that goes
3 beyond accreditation to recognize the best quality
4 imaging practices and diagnostic care. This
5 includes a comprehensive assessment of the entire
6 medical imaging enterprise, including structure and
7 outcomes. The Diagnostic Imaging Center of
8 Excellence designated -- excuse me, designation
9 recognizes excellence at multiple levels, including
10 the professional staff, the technology and the
11 policies and procedures the organization follows,
12 and superior patient care.

13 Patients throughout the Commonwealth travel
14 to our Brighton location where the recently
15 installed Hitachi 1.2 magnet provides exceptional
16 care to our claustrophobic and bariatric patients,
17 giving them the dignity and respect they deserve
18 when they arrive for their appointments and to help
19 complete their exams. This specific patient volume
20 requires additional time for their scans, limiting
21 our capability for one machine. The proposed
22 project will provide a better patient experience,
23 reduce wait times, and provide for specialty patient
24 scans through optimal use of both machines.

1 Furthermore, due to economic impact of the
2 pandemic and increasing inflation, many
3 Massachusetts families and individuals are just
4 barely making ends meet. The proposed project will
5 ensure that patients have a continuation of access
6 to high-value and high-quality imaging at a
7 freestanding location.

8 In closing, I respectfully request that the
9 Department of Public Health approve this application
10 in order for families like mine, and patients like
11 me, can receive high-quality care at an affordable
12 price.

13 Thank you for your time.

14 HEARING OFFICER KELLEY: Thank you.

15 THE MODERATOR: As a remainder, if you
16 would like to make a comment, please press Star 1.
17 Once again, that is Star 1 to make a comment.

18 Our next comment comes from Lisa Campisi.

19 Your line is open.

20 MS. CAMPISI: Good evening.

21 My name is Lisa Campisi, spelled
22 C-a-m-p-i-s-i. I appreciate the opportunity to
23 share my support for Shields Healthcare of
24 Cambridge's DoN application for a second MRI at its

1 freestanding MRI center in Brighton.

2 I'm the senior director of marketing at
3 Shields, and I've been with Shields in this field
4 for 12 years.

5 The proposed project seeks to supplement
6 the recently installed Hitachi 1.2 Tesla strength
7 magnet by reinstating the 1.5 Tesla unit. The
8 1.5 Tesla is considered the gold standard for MR
9 imaging in a clinical setting. By providing access
10 to, and optimizing the use of, both machines, the
11 proposed project will provide a better patient
12 experience, reduce wait times and provide for
13 specialty scans.

14 Further, this will ensure that these
15 patients have continued access to high-quality --
16 high-value, high-quality imaging procedures. Many
17 Massachusetts families and individuals are just
18 barely making ends meet due to the economic impact
19 of the pandemic and increasing inflation.

20 I respectfully request that the Department
21 of Public Health approve this application. Approval
22 of this request will allow for more patients like
23 myself to receive high-quality care at an affordable
24 price.

1 HEARING OFFICER KELLEY: Thank you.

2 THE MODERATOR: And as a remainder, once
3 again, to make a comment, please press Star 1.

4 We're standing by. I'm showing no comments
5 at this time.

6 HEARING OFFICER KELLEY: Thank you, Julie.
7 We'll wait just another minute.

8 (Pause)

9 Well, thank you to everyone for
10 participating this evening. And as a reminder,
11 written comments will be accepted through June 3rd.

12 Thank you very much.

13 THE MODERATOR: Thank you for your
14 participation.

15 Participants, you may disconnect at this
16 time.

17 (Whereupon, the proceedings were
18 concluded at 6:43 p.m.)

19

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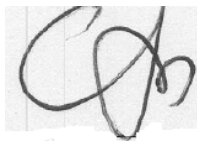
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C E R T I F I C A T E

I, Alexander K. Loos, Registered Diplomat
Reporter, do hereby certify that the foregoing
transcript, Volume I, is a true and accurate
transcription of my stenographic notes taken on May
24, 2022.

A handwritten signature in black ink, appearing to read 'A. K. Loos', is centered on the page. The signature is written in a cursive, stylized font.

Alexander K. Loos

Registered Diplomat Reporter

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