Beth Israel Lahey Health, Inc.

DON # BILH-23082513-RE

APPLICANT QUESTIONS

Responses should be sent to DoN staff at DPH.DON@State.MA.US

While you may submit each answer as available, please

- List question number and question for each answer you provide
- Submit responses as a separate word document, using the above application title and number as a running header and page numbers in the footer
- We accept answers on a rolling basis however, when providing the answer to the final question, submit all questions and answers in order in one final document.
- Submit responses in WORD or EXCEL; only use PDF's if absolutely necessary. Whenever possible, include a table in data format (NOT pdf or picture) with the response.

In order for us to review this project in a timely manner, please provide the responses by December 29, 2023.

Factor 1a.ii. - Patient Panel Need

1. In the event that the Hospital's single LINAC unit experiences down time, what other hospitals could patients be diverted to?

When the hospital's only LINAC experiences downtime, patient treatment is interrupted, likely for the duration of the downtime due to the steps involved with transferring care to a new unit. Prior to treatment on a unit, a patient must undergo CT simulation which is used to plan the exact placement of the patient on the unit for treatment. In order to transfer treatment to a unit at another facility, the patient would need to undergo new treatment simulation specific to that unit. An appointment for simulation at the new facility would need to be made. The simulation appointment would be followed by a 3-7 day turnaround time for proper technical planning. Moreover, insurers may not approve repeat simulation for the same course of radiation therapy. If the LINAC was down for an extended period of time (more than a week), the patient's care could be transferred to South Shore Hospital Radiation Oncology, Good Samaritan Medical Center in Brockton, Brockton Hospital, Cape Cod Hospital, or Beth Israel Deaconess Medical Center in Boston if the patient needed to stay within the BILH system. If this were to happen, patients would likely be triaged to determine who needed to resume treatment most urgently, as the complexity and time involved with in transferring care in the middle of a treatment course is prohibitive.

Factor 2 – Cost Containment

2. Narrative page 15 states that the Proposed Project ensures that services will be available "at the lowest reasonable aggregate cost." Please explain this statement in greater detail.

As described in the Narrative, timely and local access to cost-effective radiation therapy can reduce overall health care costs. Moreover, the Proposed Project seeks to use existing equipment in an existing space, which is the lowest cost option available for expanding access for the patient panel. Moreover, the reactivation of the second LINAC will not increase rates for LINAC services, which will help to lower the overall cost of health care.