

Shields Imaging of Eastern Massachusetts, LLC (SIEM)
DoN # 25020312-AM

AMENDMENT QUESTIONS #3

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
- When providing the answer to the final question, submit all questions and answers in one final document
- Submit responses in WORD or EXCEL; only use PDF's if absolutely necessary. If "cutting and pasting" charts, provide them in a PDF so they can be clearly seen
- **Whenever possible, include a table with the response**
- **For HIPAA compliance Do not include numbers <11.**

1. Responses to DoN Questions #1 states that the goal is to accommodate critical cases between seven and ten days of referral, based on severity. Insurance clearance related delays not considered (pg.2).
 - a. With the addition of 5 additional days of PET-CT service, what is the projected wait time for non-critical cases?

The goal is to reduce overall wait times, defined as referral to date of scan, from 15 days to between 7 to 10 days, inclusive of non-critical cases.

2. The application provides projected scan volume for 2025 to 2028 (pg.4)
 - a. Provide a breakdown of projected scan volume by clinical specialty for each year of the projections.

Type	2025	2026	2027	2028
Oncology	2096	2127	2205	2275
Urology	681	817	981	1177
Endocrinology	42	48	54	59
Neurology	185	222	266	320
Cardiology	100	200	250	300
Total Volume	3104	3414	3756	4131

- b. Provide anticipated utilization for each year of the projections.

Utilization is expected to average 70%.

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3. In the application, the Holder attributes increasing need for PET-CT services in part to the addition of Amyloid brain scans in 2024, and the Holder's plans to offer cardiac PET perfusion scans in 2025 (pg.4).

- a. Provide projected scan volume increases from 2025-2028 separately for Amyloid brain scans, and for cardiac PET perfusion scans.

Type	2025	2026	2027	2028
Amyloid Brain	185	222	266	320
Cardiac Perfusion	100	200	250	300

4. In responses to DoN Questions #1 (pg.2) and DoN Questions #2, the Holder explained the methodology used to determine need for 5 additional days of PET-CT services. The Holder is projecting 346 additional scans in 2025.

- a. Explain how the six areas that the Holder examined when determining need for 5 additional days of PET-CT services translate into a projection of 346 additional scans in 2025 as compared to 2024?

Year over year growth per specialty is as follows:

Specialty	24 to '25 growth
Oncology	84
Urology	147
Endocrinology	3
Neurology	12
Cardiology	100

Year over year increases in tumors registered by a cancer program affiliated with a Shields PET/CT program tend to increase from five to seven percent per year. This data is requested from PET/CT partners periodically to plan program needs in staffing, costs, and access, as previously described. Advisory board suggests PET/CT utilization increases nationally by nine percent. The projections show an initial year of cardiac perfusion will 100 patients. Neurologic exams are conservatively projected as the therapy industry is evolving after one year of access.

5. Responses to DoN Questions # 1 states that the Holder's experience in the market, suggests that patients in the hospital setting are waiting up to 30 days for a PET-CT scan (pg.2).

- a. Please explain what is meant by the Holder's "experience in the market" and how that experience provides an understanding of hospital wait times for PET-CT services.

The holder's experience in the market refers to the Applicant's more than 20 years providing PETCT via its joint venture partnership model in the Massachusetts and New England markets, inclusive of proprietary data.

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