

Shields Signature Imaging, LLC
DoN # N/A-24102913-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. In responses to DoN Questions #1, total scan volume and total unique patients are identical from 2018 to 2024 (pg.1). Please Explain.

The totals of unique patients were provided from the perspective that each patient scheduled has one procedure the day of exam as the injection circulates systemically thus the patient gets either a whole body image or "skull base to mid-thigh" based on indication. In other radiology technologies, the patient may undergo multiple exams (or CPT codes) in a day as part of the original appointment. For example and MRI patient might be scheduled with and without contrast, etc.

After further refining the data, we are able to illustrate the number of unique patients, defined as a patient being identified only once despite multiple scans, in the graph below. The data below illustrates that there has been an approximately 13% increase in the number of unique patient scans from 2022 to 2024.

	2018	2019	2020	2021	2022	2023	2024
Unique Patients	376	472	416	526	641	709	724

- a. Provide the scan volume for the following years:

	2018	2019	2020	2021	2022	2023	2024
Scan Volume	594	557	534	674	764	847	873

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2. To better understand Patient Panel need for additional day of services please provide the following information:

- a. PET/CT unit scan capacity per day

The capacity for PET/CT scans is a maximum of 20 scans per day, , for the standard “skull base to mid-thigh” PET scan. Some exams deviate from that protocol, and as a result, take more time, reducing the total potential scans per day. For example, a whole body Pet is up to ten minutes longer than the standard PET scan.

- b. Number of PET/CT scans performed per day

In 2024, the average scans performed per day was 17.

3. Responses to DoN Questions #1 state that the Holder anticipates that an additional day of operation of the PET/CT diagnostic imaging unit would reduce current wait times to approximately 7 to 10 days (pg.2).

- a. Explain why the Holder anticipates a reduction in wait times of 7 to 10 days.

An additional day of operation will increase weekly availability from 20 to 40 scans per week.

- b. Provide any evidence or data demonstrating the potential for a reduction in wait times of 7 to 10 days resulting from the additional day of PET/CT services.

An additional day of service will result in a patient not having to wait a full 7 days for the service to return. The option to have a Thursday and Saturday service makes the gap between service days 2 days and 4 days, respectively.

4. The DoN application states that the additional day of service will have no cost implications to the Holder (pg.3). Responses to DoN Questions (pg.2) states that operating costs impacted by the additional day of service include the daily equipment fee for the mobile unit and the staffing of the unit.

- a. Is the Holder responsible for the increase in operating costs?

- i. The response to question 10.5.b in the DoN Application confers that are no “capital costs” to the Applicant as this is an existing service. There are minor “operating costs” related to staffing and equipment fee in order to operationalize an additional day of service. This response is similar to the narrative included in previous DoN Amendments (see attached example).

5. The application states the current wait time is 16 days from referral to the date of the scan (pg.3). Responses to DoN Questions #1, show a decrease in wait time of 2 days from 2023, to the current wait time of 16 days (pg.2). Explain how wait time demonstrates need for an additional day of PET/CT services.

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PET scans are predominantly used for cancer patients. PETCT is part of a treatment planning process and timeliness to treatment is critical and typically a measured index in cancer treatment. Delays in the process, like access to diagnostic testing, add stress to the patient and has negative downstream effects on patient health.