

Beth Israel Lahey Health, Inc.

DoN # 23050911

APPLICANT RESPONSES

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 September 1, 2023.

Factor 1a - Patient Panel

1. **We note that BILH's Patient Panel (see definition in 105 CMR 100) demographics, AJH's patient population demographics, and utilization tables did not include any data from FY2023. Please provide FY2023 data for the following tables:**
 - a. **Table 1: BILH Patient Panel Demographics (Narrative Page 2)**
Please see Attachment 1, Tab 1
 - b. **Table 2: AJH's Patient Population Demographics (Narrative Page 4)**
Please see Attachment 1, Tab 2
 - c. **Table 4: CT Downtime Hours (Narrative Page 6)**
Please see Attachment 1, Tab 3. Additionally, the Hospital has 12 hours of scheduled maintenance planned prior to October 1, 2023 which will add a minimum of 12 hours of downtime due to repairs for FY23.
 - d. **Table 5: Historical LDCT Volume (Narrative Page 7)**
Please see Attachment 1, Tab 3.

Factor 1a.ii. – Patient Panel Need

2. **Table 3: Historical Utilization on Page 5 of the narrative lists the same CT volume for both FY21 and FY22. Please verify whether this is accurate or provide corrected numbers.**

Please see the table below for the corrected FY2022 number (highlighted).

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TABLE 3: Historical CT Volume

Historical CT Volume	FY20 ¹	Percent Change	FY21 ²	Percent Change	FY22	FY23 through April
CT Volume	17,271	-2.21%	16,890	5.07%	17,747	10,547

3. Page 6 of the Narrative notes that AJH is designated as a Primary Stroke Services Hospital, requiring that a patient receive CT imaging within 25 minutes of arrival at the Emergency Department. Please provide a table of Stroke Patient Volume for AJH's Emergency Department for the years 2020-2023 (and clarify whether the data is by fiscal year or calendar year).

Please see Attachment 1, Tab 5

Factor 1: f) Competition on price, total medical expenses (TME), costs and other measures of health care spending

4. In terms of an Appropriate Use Criteria (AUC):

- a. Please describe the AUC that the Hospital uses for CT scans.

Currently, the Hospital and its physicians follow the American College of Radiology's Appropriateness Criteria. Physicians are encouraged to consult the Appropriateness Criteria as well as the radiologist on-call anytime there is a question of whether CT is the most appropriate tool.

- b. Does the Applicant have a procedure in place to monitor and address outliers to the AUC determination?

The Applicant and its hospitals adheres to all regulatory requirements regarding AUC. At this time, it is the Applicant's understanding that Medicare is not moving forward with a requirement to implement AUC programs.

¹ Fiscal year is defined as October 1 through September 30 for all data aside from data in the Applicant and Hospital's patient panel.

² CT scan volume likely decreased from FY20 to FY21 due to patient avoidance of hospitals during the COVID-19 Pandemic.