## South Shore Health System, Inc.

DoN #21040109-HS

## **APPLICANT QUESTIONS #3**

Responses should be sent to DoN staff at <a href="mailto:DPH.DON@State.MA.US">DPH.DON@State.MA.US</a>

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
- Whenever possible, include a table with the response
- Responses must be available in PDF and source document (Excel preferred for data and Word for narrative).
- 1. Response #2 (pg.2) to DoN Questions #2 includes the table below on SSHS MRI patients. Explain why payer mix does not sum to 100%.

Please see the revised chart below:

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FY20							
ACO and APM Contracts	4.40%	Non-ACO and Non-APM Contracts					
		Commercial PPO/Indemnity	21.55%				
		Commercial HMO/POS	30.65%				
		MassHealth	1.88%				
Non-ACO and Non-APM Contracts	95.60%	Managed Medicaid	1.15%				
		Commercial Medicare	9.52%				
		Medicare FFS	35.04%				
		All Other	0.21%				
TOTAL	100%	TOTAL	100.00%				

2. Response #6 (pg.4) to DoN Questions #2 states the following:

The MIH Program currently serves: Abington, Braintree, Cohasset, Duxbury, Hanover, Hingham, Hull, Holbrook, Kingston, Marshfield, Norwell, Quincy, Pembroke, Plymouth, Randolph, Rockland, Scituate, Whitman, and Weymouth.

Do both the SNF and Basic Programs service the cities and towns mentioned above?

Yes.

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3. The application provided projected MRI scans at South Shore Hospital (SSH) Main campus after project implementation (CY22). Based on the existing MRI volume at SSH main campus, MRI scans will increase from 6,497 (FY20) to 13,015 scans in Year 1 as a result of the Proposed Project. The Applicant anticipates 1,700 additional scans from patients referred out of the system and patients transferred to off-campus facilities, as well additional volume from the Breast Cancer Center(Responses, pgs. 6-7). Where will the rest of the new volume originate (existing SSHS patients, new patients, etc.)?

## **Projected MRI Scans at SSH Main Campus**

	Year 1	Year 2	Year 3	Year 4	Year 5
SSH 3T MRI	6,720	6,854	6,991	7,131	7,273
SSH 1.5T MRI	6,295	6,421	6,549	6,680	6,814
Total	13,015	13,275	13,540	13,811	14,087

In addition to scans that will be retained by SSH because of the availability of a 3T machine, the additional scans projected can be attributed to a growing and aging population, and new patients. Other reasons include program growth and the addition of services to meet the needs of our population. These additional services include: prostate imaging, neuro imaging, perfusion brain tumor imaging, seizure imaging, inflammatory arthropathies, small joint MRI, improved pediatric imaging, MR Enterography , and acute abdomen MRI. Additionally, SSH is looking to decrease inpatient and Emergency patient wait times which currently exceed 24 hours. The increased capacity of two scanners at the main campus will better serve our patient population by reducing their overall length of stay, in turn increasing the number of patients served.

4. The application states that two alternatives to the Proposed Project were considered (Factor 5):
1) Acquire a mobile MRI unit, and 2) Maintain the status quo of the existing MRI units. Given that the existing 1.5T MRI unit at SSH main campus is 18 years old and requires significant maintenance, did the Applicant consider replacing the existing 1.5T MRI unit?

SSH plans to replace the 17-year old 1.5T with a new 1.5T machine concurrent with the addition of a 3T machine.