

Comments on Proposed Policy TE-4

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1. Raleigh Radiology appreciates staff and Committees for presenting Policy TE-4 for public comment this year.
2. With minor clarification, TE-4 is a natural extension of TE-3 and should be approved.
3. The mobile portion of TE-4 should be eliminated now and discussed more in 2021.
4. Our attorney, Forrest Campbell, has assured us that the opinion of the Alliance lawyers is wrong. The SHCC has the right to modify this policy as it pleases.
5. Let me be clear, based on Raleigh Radiology's experience: there is only ONE mobile company in North Carolina organized to serve new unrelated sites. Alliance conveniently counted mobile units owned by related parties.
6. Our service contracts with Alliance allows them to terminate service and remove the equipment. If this happened, we would have no other MRI option; our patients would have no MRI service and the Plan would show an immediate deficit of one to two MRI scanners.
7. Wake County is a bit unusual. Three grandfathered service contracts for fixed scanners operate above the service area threshold, and have for several years. But the standard methodology is not based on trends. It is based on one year of data provided by the equipment owner, in our case Alliance.
8. In a previous public hearing, commenters for Alliance Medical suggested that the problem in Wake resolved when the Agency approved the 2019 CON application from Raleigh Radiology Cary. It did not. Compared to Mecklenburg County, Wake County residents have far less access. Five of Wake's 13 fixed scanners are in service contracts. Yet, the Agency can award only one fixed MRI scanner a year.
9. Alliance staff have tried to be accommodating when we asked for more service this year. However, they have been unable to supply the MRI equipment type that we want and Alliance struggled to find us available days. This confirms a deficit, not a surplus of MRI scanners. MRI is now a standard imaging modality. There is no need for concern that Alliance will be short of customers under a TE-4 fixed MRI policy.
10. A modified TE-4 is a win- win for all, not as Alliance would have you believe, a one-sided proposition
11. The SHCC could easily address wording issues with regard to the fixed MRI portion of TE-4:
 - Change the policy name to Exemption for Existing Contracted MRI Services in Fixed Locations,
 - Define "Fixed MRI" by using 10A NCAC 14C .2701(7);

- Use “related party” as defined in 10A NCAC 14C .2701(16); and,
 - a. Make the policy wording consistent with Item 8 in the standard methodology.

12. We urge the Committee to stay the course, clean up and approve TE-4 with regard to the fixed MRI only.

We appreciate the time and energy that goes in to developing the Plan. We applaud Ms. Frisone and her team for being forward thinking.

I am happy to answer any questions.