



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

JOSH STEIN • Governor

DEVPUTTA SANGVAI • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

December 30, 2025

Tina Hinshaw

Tina.hinshaw@akumin.com

Exempt from Review – Replacement Equipment

Record #: 5036
Date of Request: December 11, 2025
Business Name: Alliance Healthcare Services, Inc.
Business #: 60
Project Description: Temporary replacement of mobile MRI scanner Signa 269
County: Wake

Dear Ms. Hinshaw:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced project is exempt from certificate of need review in accordance with G.S. 131E-184(a)(7). Therefore, you may proceed to temporarily replace mobile MRI scanner Signa 269 serial # 1KKVA4829L208014 GE Signa with mobile MRI scanner Signa 492 serial # 1KKVA4828JL226990 GE Signa without a certificate of need while mobile MRI scanner Signa 269 undergoes maintenance and repairs. This determination is based on your representations that mobile MRI scanner Signa 492 will be removed from the State upon completion of the maintenance and repairs on mobile MRI scanner Signa 269 and will not be used again in the State without first obtaining a certificate of need if one is required.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Gregory F. Yakaboski
Project Analyst

Micheala Mitchell
Chief

cc: Acute and Home Care Licensure and Certification Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

LOCATION: 1915 Health Services Way, Raleigh, NC 27607
MAILING ADDRESS: 1915 Health Services Way, 2704 Mail Service Center, Raleigh, NC 27699-2704
www.ncdhs.gov/dhsr • TEL: 919-855-3873

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



December 11, 2025

Mr. Mike McKillip, CON Analyst
Ms. Micheala Mitchell, Chief
Health Planning and Certificate of Need Section
2704 Mail Service Center
Raleigh, NC 27699-2704

Business Name: Alliance Health Services
Business Number: 60
Signa 269 Serial # 1KKVA48292L208014 GE Signa
Signa 492 Serial # 1KKVA4828JL226990 GE Signa

RE: Alliance Healthcare Services (aka Akumin) - Written Notice for Exemption from CON Review for the
Temporary Replacement of Signa 269

Dear Mr. McKillip and Ms. Mitchell:

I am writing regarding the need to temporarily replace MRI scanner Signa 269 such that maintenance and repairs can be completed. Please accept this notice of exemption to temporarily replace Signa 269 with Signa 492, which is an existing mobile MRI scanner owned by Akumin and will be utilized as the interim temporary MRI for this scanner. When Signa 492 is no longer needed to serve as a temporary replacement for Signa 269, it will be removed from North Carolina.

The Akumin MRI Signa 269 operating under CON#F695703 and is a scanner that has properly been reported in the 2024 NC MRI Equipment Inventory and serves one location:

Piedmont Healthcare
700 Sullivan Rd
Statesville, NC 28677

This letter provides justification and written notice regarding the replacement equipment in accordance with NCGS 131 E-184. Akumin also provides documentation that the equipment conforms to the Certificate of Need Laws and Administrative rules: GS 131E-184(a) (7) Exemptions from review to provide replacement equipment 10A NCAC 14C.0303 Replacement Equipment Administrative Rules.

Compliance Documentation

Compliance with G.S. 131E-176 (22a) Replacement Equipment Definition is evident because the temporary replacement scanner has a fair market value of \$300,000 which is less than the \$2,000,000 threshold. The replacement PETCT equipment will be used for the same diagnostic purposes as the existing equipment. In addition, Akumin is providing written notice to the Department in accordance with G.S. 131E-184 (a) (7) Exemption from Review to provide replacement equipment.

Applicability and Conformance with Administrative Rule 10A NCAC 14C.0303 Replacement Equipment Akumin plans to use an existing mobile PETCT as a temporary replacement. No equipment will be purchased. The temporary replacement equipment conforms to the rules as follows:

10A NCAC 14C .0303 REPLACEMENT EQUIPMENT (a) This Rule defines the terms used in the definition of "replacement equipment" set forth in G.S. 131E-176(22a).

Akumin has reviewed this rule definition.



(b) "Currently in use" means that the equipment to be replaced has been used by the person requesting the exemption at least 10 times to provide a health service during the 12 months prior to the date the written notice required by G.S. 131E-184(a) is submitted to the CON Section.

Akumin confirms that Signa 492 meets the definition of "currently in use" because the MRI scanner provides service during the previous 12 months prior to the date of this written notice.

(c) Replacement equipment is not "comparable" if: (1) the replacement equipment to be acquired is capable of providing a health service that the equipment to be replaced cannot provide; or (2) the equipment to be replaced was acquired less than 12 months prior to the date the written notice required by G.S. 131E-184(a) is submitted to the CON Section and it was refurbished or reconditioned when it was acquired by the person requesting the exemption.

The replacement MRI scanner is comparable to the equipment being replaced because the temporary replacement equipment will be used to acquire the same types of MRI images and data. Akumin certifies that the replacement mobile MRI equipment will be used for the same diagnostic purposes as the existing MRI unit.

The existing equipment, Signa 269, will be temporarily replaced by Signa 492, which will be removed from North Carolina once repairs to Signa 269 are completed. The temporary use of replacement Signa 492 will be discontinued in approximately two weeks (December 2025) when the repair of Signa 269 has been completed and returned to service.

Thank you for your review and consideration of this information. Please call me at 805.325.3078 if you have any questions.

Sincerely,

Tina Hair Hinshaw, MBA
RVP, Mobile Operations Southeast Region
805.325.3078
tina.hinshaw@akumin.com

CC: Rodney Skelding, Manager of Operations, Akumin David Joslin, Director of Operations, Akumin

From: [Mckillip, Mike](#)
To: [Stancil, Tiffany C](#)
Cc: [Mitchell, Micheala L](#)
Subject: FW: [External] Akumin Temp Asset Coverage (due to maintenance) Signa 269 to be covered by Signa 492
Date: Thursday, December 11, 2025 9:36:39 AM
Attachments: [AR_NCCON_Signa492_Temp_Coverage_for_Signa269_12112025.pdf](#)
[image001.png](#)

Hi Tiffany,

Please log and assign this replacement equipment exemption request to Greg. Thanks.

Mike

Michael McKillip

Team Leader, Certificate of Need
Division of Health Service Regulation, Healthcare Planning and Certificate of Need
[NC Department of Health and Human Services](#)

Office: 919-855-3877 (I am in the office on Wednesday and Friday. I can best be reached by email on Monday, Tuesday and Thursday.)
mike.mckillip@dhhs.nc.gov

Physical Address:

1915 Health Services Way, 2nd Floor
Raleigh, NC 27607



Mailing Address:

2704 Mail Service Center
Raleigh, NC 27699-2704

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From: Tina Hinshaw <tina.hinshaw@akumin.com>
Sent: Thursday, December 11, 2025 8:50 AM
To: Mckillip, Mike <mike.mckillip@dhhs.nc.gov>; Mitchell, Micheala L <Micheala.Mitchell@dhhs.nc.gov>
Cc: Tina Hinshaw <tina.hinshaw@akumin.com>; David Joslin <David.Joslin@akumin.com>; Rodney

Skelding <rodney.skelding@akumin.com>; Erin Schietinger <erin.schietinger@akumin.com>

Subject: [External] Akumin Temp Asset Coverage (due to maintenance) Signa 269 to be covered by Signa 492

CAUTION: External email. Do not click links or open attachments unless verified. Report suspicious emails with the Report Message button located on your Outlook menu bar on the Home tab.

Mike and Micheala,

Please see attached notice of exemption for Signa 269 to be covered by Signa 492 (short term maintenance).

Regards,

Tina

Tina Hair Hinshaw

RVP Mobile Operations, Southeast

805.325.3078 (cell)

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Vice President, Regional

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