

NORTH CAROLINA STATE HEALTH COORDINATING COUNCIL**COMMENTS ON PETITION REGARDING FIXED MRI EQUIPMENT**

Duke University Health System, Inc. hereby submits these comments regarding the petition from Cape Fear Valley Health System to create a new policy governing the need for MRI equipment in the 2017 State Medical Facilities Plan.

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This petition proposes a new policy governing fixed MRI scanners in “community hospitals,” based on an argument that it would improve access for rural populations and decrease patient travel time and trips to larger urban hospitals in other counties. The petition identifies those counties without a full-time fixed MRI as those in particular need of the proposed change. However, the proposed policy does not define “community hospital” or limit its geographic scope and therefore the suggested language is broader than the rationale offered for it.

To the extent that the SHCC is interested in evaluating a need methodology to increase access to fixed MRIs in rural areas, any such methodology or policy should include appropriate language to further that goal, including defining “community hospital” more specifically. Otherwise, the policy as proposed could be used to allow hospitals not only to add an MRI in a service area that does already have existing fixed MRI access, but even, potentially, to do so where the hospital applicant is part of a system that operates a fixed MRI at another facility in the same county. This could contravene existing certificate of need regulations that consider utilization of a provider’s existing MRI scanners before the provider can add more in the same service area. See, e.g., 10A NCAC 14C. 2703.

Similarly, to the extent that the SHCC considers a policy change based on the argument that MRI is an essential component of hospital emergency services, any resulting policy or methodology should be limited to those hospitals providing 24/7 emergency services.