

# JEFFERSON RADIOLOGY

DIAGNOSTIC & INTERVENTIONAL SPECIALISTS

**Avon**

100  
Simsbury  
Road

**Enfield**

137  
Hazard  
Avenue

**Glastonbury**

704  
Hebron  
Avenue

**Hartford**

85  
Seymour  
Street

**West**

**Hartford**  
941  
Farmington  
Avenue

**Wethersfield**

1260  
Silas Deane  
Highway

April 20, 2007

Honorable Cristine Vogel  
Commissioner  
Office of Health Care Access  
410 Capitol Avenue, MS #13HCA  
P.O. Box 340308  
Hartford, CT 06134-0308

RECEIVED  
OFFICE OF  
HEALTH CARE ACCESS

2007 APR 24 PM 12:03

RECEIVED

**Re: Letter of Intent: MRI Scanner for Farmington Office**

Dear Commissioner Vogel:

Jefferson Radiology (JR) is pleased to submit the attached Letter of Intent for the acquisition of a 3 Tesla MRI scanner for its Farmington office. MRI capacity on JR's high field closed magnets is very limited and hours of operation have been expanded. Appointment backlogs of 4-6 days necessitated scheduling patients as late as 11:00 p.m. during certain weekdays and expanding weekend hours. Despite the increase in hours of operation, the high field magnets continue to be fully utilized and there is no capacity for the continued projected volume growth.

Given the lack of space for an additional MRI in any of the current offices, JR would like to locate a 3T MRI in its Farmington office (due to open by the end of 2007). The addition of a 3T MRI in Farmington will help significantly to decant some of the current MRI volume from the existing offices and will make 3T MRI technology easily accessible to the greater Hartford area.

Please forward, to my attention, the Certificate of Need (CON) application questions. I look forward to working with you and the Office of Health Care Access staff throughout the completion of the CON for this important project.

Thank you for your consideration.

Sincerely,



Mark Grossman  
Chief Executive Officer

Attachment



# **State of Connecticut Office of Health Care Access Letter of Intent Form Form 2030**

All Applicants involved with the proposal must be listed for identification purposes. A proposal's Letter of Intent (LOI) form must be submitted prior to a Certificate of Need application submission to OHCA by an Applicant, pursuant to Sections 19a-638 and 19a-639 of the Connecticut General Statutes and Section 19a-643-79 of OHCA's Regulations. Please complete and submit Form 2030 to the Commissioner of the Office of Health Care Access, 410 Capitol Avenue, MS# 13HCA, P.O. Box 340308, Hartford, Connecticut 06134-0308.

## **SECTION I. APPLICANT INFORMATION**

If this proposal has more than two Applicants, please attach a separate sheet, supplying the same information for each additional Applicant in the format presented in the following table.

	Applicant One	Applicant Two
Full legal name	Jefferson Radiology, P.C.	
Doing Business As		
Name of Parent Corporation		
Applicant's Mailing Address, if Post Office (PO) Box, include a street mailing address for Certified Mail	111 Founders Plaza Suite 400 East Hartford, CT 06108	
What is the Applicant's Status: P for Profit or NP for Nonprofit	P	
Does the Applicant have Tax Exempt Status?	Yes                      No <input checked="" type="checkbox"/>	Yes                      No
Contact Person, including Title/Position: This Individual will be the Applicant's Designee to receive all correspondence in this matter.	Mark Grossman, Chief Executive Officer	
Contact Person's Mailing Address, if PO Box, include a street mailing address for Certified Mail	111 Founders Plaza Suite 400	

	East Hartford, CT 06108	
Contact Person's Telephone Number	(860) 291-6550 (PH)	
Contact Person's Fax Number	(860) 291-6594 (Fax)	
Contact Person's e-mail Address	mgrossman@jeffersonr adiology.com	

## SECTION II. GENERAL APPLICATION INFORMATION

a. Proposal/Project Title:

**Acquisition of 3T MRI for Farmington, Connecticut office**

b. Type of Proposal, please check all that apply:

- ☐ Change in Facility (F), Service (S) or Function (Fnc) pursuant to Section 19a-638, C.G.S.:
- ☐ New (F, S, Fnc)      ☐ Replacement      ☐ Additional (F, S, Fnc)  
☐ Expansion (F, S, Fnc)      ☐ Relocation      ☐ Service Termination  
☐ Bed Addition      ☐ Bed Reduction      ☐ Change in Ownership/Control
- ☒ Capital Expenditure/Cost, pursuant to Section 19a-639, C.G.S.:
- ☒ Project expenditure/cost cost greater than \$ 3,000,000  
☒ Equipment Acquisition
- ☒ New      ☐ Replacement      ☐ Major Medical (> \$3,000,000)  
☒ Imaging      ☐ Linear Accelerator
- ☐ Change in ownership or control, pursuant to Section 19a-639 C.G.S., resulting in a capital expenditure over \$3,000,000

c. Location of proposal, identifying Street Address, Town and Zip Code:

399 Farmington Avenue, Farmington, CT

- d. List each town this project is intended to serve: The proposed MRI scanner is primarily intended to serve residents of the following towns:

- Avon
- Bristol
- Burlington
- Farmington
- New Britain
- Newington
- Plainville
- West Hartford

- e. Estimated starting date for the project: January 2008

- f. Type of project: 19  
(Fill in the appropriate number(s) from page 7 of this Form)

**Number of Beds (to be completed if changes are proposed)**

Type	Existing Staffed	Existing Licensed	Proposed Increase or (Decrease)	Proposed Total Licensed

**Not applicable**

**SECTION III. ESTIMATED CAPITAL EXPENDITURE INFORMATION**

- a. Estimated Total Project Cost: \$3,525,872
- b. Please provide the following tentative capital expenditure/costs related to the proposal:

Medical Equipment Purchases	
Major Medical Equipment Purchases	
Non-Medical Equipment Purchases*	
Land/Building Purchases	
Construction/Renovation	\$365,200
Other (Non-Construction) Specify: <u>Sales Tax (6%)</u>	\$178,906
<b>Total Capital Expenditure</b>	<b>\$</b>
Medical Equipment – Fair Market Value of Leases	\$

Major Medical Equipment – Fair Market Value of Leases	\$2,981,766
Non-Medical Equipment – Fair Market Value of Leases*	
Fair Market Value of Space – Capital Leases Only	
<b>Total Capital Cost</b>	<b>\$3,525,872</b>
<b>Total Project Cost</b>	<b>\$3,525,872</b>
Capitalized Financing Costs (Informational Purpose Only)	\$

\* Provide an itemized list of all non-medical equipment to be purchased and leased.

- c. If the proposal has a total capital expenditure/cost of \$20,000,000 or more, you may request a Waiver of Public Hearing pursuant to Section 19a-643-45 of OHCA's Regulations? Please check the your preference as follows:

☒ No ☐ Yes

If you checked "Yes" above, please check the appropriate box below:

☐ Energy ☐ Fire Safety Code ☐ Non Substantive

If you checked "Yes" to the Waiver of Public Hearing, please provide the following:

- a) Supporting documentation from elected town officials  
(i.e. letter from Mayor's Office).

### Major Medical and/or Imaging Equipment Acquisition:

Equipment Type	Name	Model	Number of Units	Cost per unit
3T MRI	General Electric	Signa HDx	1	\$2,981,766

Note: Provide a copy of the vendor contract or quotation for the major medical/imaging equipment.

**A copy of the vendor quote is included as *Attachment I*.**

- d. Type of financing or funding source (more than one can be checked):

☒ Applicant's Equity      ☒ Capital Lease      ☐ Conventional Loan  
☐ Charitable Contributions      ☐ Operating Lease      ☐ CHEFA Financing  
☐ Funded Depreciation      ☐ Grant Funding      ☐ Other (specify): \_\_\_\_\_

## SECTION IV. PROJECT DESCRIPTION

Please provide a description of the proposed project, highlighting each of its important aspects, on at least one, but not more than two separate 8.5" X 11" sheets of paper. At a minimum each of the following items need to be addressed, if applicable.

### Background/Project Overview:

Jefferson Radiology (JR) is a private physician group of 39 radiologists, offering sub-specialized diagnostic and interventional imaging services. All the physicians in JR are licensed in the State of Connecticut and Board Certified. They are committed to delivering high quality radiology services. Jefferson Radiology, established in 1963, is the largest private practice radiology group in Connecticut. JR provides radiology services to Hartford Hospital, Johnson Memorial Hospital, Windham Community Hospital, and Connecticut Children's Medical Center. Additionally, JR has six private offices located in Avon, Glastonbury, Hartford, West Hartford, Enfield, and Wethersfield. JR provides MRI, CT, ultrasound, mammography, nuclear medicine, and diagnostic and interventional imaging services. JR prides itself on offering state of the art equipment, friendly and compassionate staff and a team of physicians dedicated to providing the highest quality of care.

JR currently provides MRI services in 5 of its 6 existing office locations. The practice overall performed more than 16,500 MRI scans in 2006, a 36% increase from volumes in 2004. MRI capacity on the high field closed magnets is very limited and hours of operation have been expanded. Appointment backlogs of 4-6 days necessitated scheduling patients as late as 11:00 p.m. during certain weekdays and expanding weekend hours. Despite the increase in hours of operation, the high field magnets continue to be fully utilized and there is no capacity for the continued projected volume growth. Additionally, operating late into the evening and night is not convenient for patients and very difficult to staff. Additional high field MRI capacity is needed to meet the current and projected demand for JR's patients. MRI volume is expected to continue to grow due to the growth and aging of the population, advances in technology and new and expanded uses for the technology. A recent medical study demonstrated the tremendous positive impact of using MRI to identify breast cancers that were missed with mammography in woman previously diagnosed with breast cancer. The impact of this and other related studies is that breast MRI volume will increase and will further drain limited scanner capacity at JR. Breast studies are time consuming and generally require double the scan time as other areas of the body. In addition to projected growth in breast MRI, body and brain imaging volumes are also expected to continue to grow.

3 Tesla (3T) refers to the strength of the magnetic field that is utilized to acquire the MRI images. The 3T MRI system is twice as strong as the other 1.5T "high field" MRI scanners. This increased magnet strength can be utilized to increase the resolution and/or speed of the images being acquired. 3T MRI technology is quickly emerging as the preferred technology for certain patient populations that need very high resolution imaging including some orthopedic (e.g. small joints, cartilage), neurological (e.g. Multiple Sclerosis, brain tumors), and patients who require breast imaging. Currently,

this technology, although available in other parts of the State, is not available in the Greater Hartford area. As OHCA is aware, JR will be opening a new office in Farmington by the end of 2007. Given the lack of space for an additional MRI in any of the current offices, JR would like to locate a 3T MRI in its Farmington office. The addition of a 3T MRI in Farmington will help significantly to decant some of the current MRI volume from the existing offices (especially West Hartford and Glastonbury) and will make 3T MRI technology easily accessible to the greater Hartford area. Once volumes are decompressed at the Glastonbury and West Hartford locations, hours of operation can resume a more reasonable schedule and with the additional scanner in Farmington, future backlogs prevented.

The Farmington office is located in a large medical office complex. There will be a significant number of physician practices in the complex and Jefferson Radiology will be the only radiology provider. Referring physicians in the greater Farmington area have indicated their strong desire to have patients scanned on a 3T MRI machine and have encouraged JR to pursue the acquisition of such equipment.

1. List the types of services are currently being provided. If applicable, provide a copy of each Department of Public Health (DPH) license held by the Applicant.

JR is a private physician radiology practice that provides the full scope of diagnostic and interventional imaging procedures. DPH does not license physician practices, however all individual physicians in JR are licensed in the State of Connecticut.

2. List the types of services are being proposed and what DPH licensure categories will be sought, if applicable.

**MRI scanning services are being proposed by a private physician radiology practice, therefore, DPH licensure is not applicable.**

3. Identify the current population served and who is the target population to be served.

**The current population served and the target population to be served is primarily patients who live in the greater Farmington area that require high field MRI scanning services. Such patients generally have orthopedic, neurological and/or cardiac and vascular conditions that require high resolution MRI images for appropriate diagnosis and treatment planning.**

4. Identify any unmet need and describe how this project will fulfill that need.

**As previously noted, JR's existing high field MRI scanners are operating beyond full capacity as evidenced by extensive hours of operation and high scan volumes. Additional high field MRI capacity is required within the practice to meet the current and projected demand. Additionally, as noted above, there are no 3T MRI scanners in the greater Hartford area. Patients in need of a 3T scan must travel out of the general area. The proposed 3T MRI in Farmington will help to fulfill the need for 3T MRI services for the greater Hartford area.**

5. Are there any similar existing service providers in the proposed geographic area?

**There are no providers of 3T MRI services in the proposed geographic area.**

6. Describe the anticipated effect of this proposal on the health care delivery system in the State of Connecticut.

**The effect of this project on the health care delivery system in Connecticut will be positive. Jefferson Radiology's patients will be provided access to 3T MRI services close to their homes and easier access overall to high field MRI imaging services.**

**3T MRI offers some significant clinical advantages to patients and will improve diagnosis and treatment decisions. Such improvements could prevent unnecessary invasive procedures, reduce the time to diagnosis, better target surgical interventions, and facilitate more rapid recovery.**

7. Who will be responsible for providing the service?

**Jefferson Radiology, P.C. will be responsible for providing the service.**

8. Who are the current payers of this service and identify any anticipated payer changes when the proposed project becomes operational?

**Current payers of this service include Medicare, Medicaid, and commercial payers. There are no anticipated payer changes when the proposed project becomes operational.**



**AFFIDAVIT****To be completed by each Applicant**Applicant: Jefferson Radiology, P.C.Project Title: Acquisition of a 3T MRI in Farmington, CTI, Mark Grossman,  
(Name)Chief Executive Officer  
(Position – CEO or CFO)RECEIVED  
2007 APR 24 PM 12:03  
OFFICE OF THE  
CLERK OF THE  
SUPERIOR COURT  
STATE OF CONNECTICUT


of Jefferson Radiology, P.C. being duly sworn, depose and state that the information provided in this CON Letter of Intent (Form 2030) is true and accurate to the best of my knowledge, and that Jefferson Radiology, P.C. complies with the appropriate and (Facility Name) applicable criteria as set forth in the Sections 19a-630, 19a-637, 19a-638, 19a-639, 19a-486 and/or 4-181 of the Connecticut General Statutes.

Mark Grossman  
Signature

4/20/07  
Date

Subscribed and sworn to before me on April 20, 2007

Barbara B. Peracchio  
Notary Public/Commissioner of Superior Court

My commission expires: \_\_\_\_\_  

 Barbara B. Peracchio  
 Notary Public, State of CT  
 My Commission Expires:  
 June 30, 2010

### Project Type Listing

Please indicate the number or numbers of types of projects that apply to your request on the line provided on the Letter of Intent Form (Section II, page 2).

#### Inpatient

1. Cardiac Services
2. Hospice
3. Maternity
4. Med/ Surg.
5. Pediatrics
6. Rehabilitation Services
7. Transplantation Programs
8. Trauma Centers
9. Behavioral Health (Psychiatric and Substance Abuse Services)
10. Other Inpatient

#### Outpatient

11. Ambulatory Surgery Center
12. Birthing Centers
13. Oncology Services
14. Outpatient Rehabilitation Services
15. Paramedics Services
16. Primary Care Clinics
17. Urgent Care Units
18. Behavioral Health (Psychiatric and Substance Amuse Services)
19. MRI
20. CT Scanner
21. PET Scanner
22. PET/CT Scanner
23. Other Imaging Services
24. Lithotripsy
25. Other Medical Equipment
26. Mobile Services
27. Other Outpatient
28. Central Services Facility
29. Occupational Health

#### Non-Clinical

30. Facility Development
31. Non-Medical Equipment
32. Land and Building Acquisitions
33. Organizational Structure (Mergers, Acquisitions, Affiliations, and Changes in Ownership)
34. Renovations
35. Other Non-Clinical

**ATTACHMENT I**  
**VENDOR QUOTE**

Quotation Number: P5-C8461 V 3

Jefferson X-Ray Group, P.C.  
85 Seymour St, Ste 200  
Hartford CT 06106

Attn: Dr William Glucksman  
85 Seymour St, Ste 200  
Hartford CT 06106

Date: 04-16-2007

Qty	Catalog No.	Description
1		<b>Signa HDx 3.0T</b>
1	S7505LB	<p><b>Signa HDx 3.0T 16-Channel Fixed Site MR System</b></p> <p>The Signa HDx 3.0T scanner launches a new era in MR scanning with a premium technology platform delivering unparalleled performance and image quality. Exclusive GE applications provide unprecedented imaging speed, resolution, and contrast in neurovascular, cardiovascular, abdominal, orthopedic and spectroscopic imaging. Utilizing exclusive TwinSpeed dual-gradient design, and driven by high-fidelity gradient drivers, this premium system offers full 45-cm field-of-view imaging. It incorporates GE's exclusive HDx technology to enable the industry's fastest pulse-sequence performance. And its 16-channel architecture is equipped with a four-blade Volume Reconstruction Engine (VRE) to provide real-time image reconstruction capability, enhanced parallel imaging reconstruction, and rapid 3D volume reconstruction. This configuration also includes a quadrature transmit/receive RF head coil.</p> <p>The revolutionary Signa HDx 3.0T superconducting magnet represents a true breakthrough in magnet design. It delivers everything that you demand from a high performance, 3.0T system: a short and compact design, industry-leading homogeneity, a clinically relevant 45-cm imaging field of view, and a 60-cm bore to maximize patient comfort.</p> <p>By using two sets of actively shielded gradient coils integrated into a single subsystem, the innovative, GE-exclusive TwinSpeed Gradient Module virtually eliminates tradeoffs. Its Zoom mode offers outstanding performance for small-field imaging, with amplitudes up to 50 mT/m and a slew rate of 150 mT/m/ms. The Whole-Body mode, designed for larger FOVs, offers amplitudes of up to 23 mT/m and a slew rate of 80 mT/m/ms. The result is the high-performance speed and resolution demanded for high-definition MR, without compromising your ability to use a large FOV.</p> <p>The HDx 3.0T platform comes standard with GE's proprietary acoustic noise management system, Quiet Technology, including a vacuum enclosure design that surrounds the gradient coils. The result is reduced noise levels that are comparable to 1.5T systems, with absolutely no compromise or de-rating of high duty cycle gradient-intensive pulse sequences.</p> <p>The HDx 3.0T system comes standard with PERFORM: GE's unique and comprehensive approach that removes the burden of Specific Absorption Rate (SAR) management at 3.0T. PERFORM combines an extremely efficient body coil design with continuous closed loop processing feedback and a variety of unique preparation pulses and scanning approaches to make your 3.0T scanning experience efficient and clinically relevant.</p> <p><b>Patient Transport:</b> The patient table and transport includes a detachable table with automated vertical and longitudinal power drives for easy patient positioning and maximum patient safety.</p>

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PO Box 414, Milwaukee, WI 53201-0404  
General Electric Company  
General Electric Company, GE Medical Systems

Quotation Number: P5-C8461 V 3

Qty	Catalog No.	Description
		<p>The table can be easily docked and undocked by a single operator. As a result, emergency patient extraction can typically be performed in less than 30 seconds eliminating the need for 3.0T compatible emergency equipment. The table includes a self-storing, non-ferrous IV pole, table pad and positioning safety rails and security straps.</p> <p>This configuration is designed for installation into a fixed site and includes a complete fixed site hardware kit, but does not include chillers or a main disconnect panel (which is optional). Rigging for system installation is the responsibility of the Customer.</p> <p>Operator Console and User Interface. The operator console consists of the Linux computer, LCD monitor, scan control keyboard, and chair. The computer components are housed in a single tower configuration, and the flat panel display monitor provides high, 1280x1024, resolution with a 300:1 contrast ratio. The English scan control keyboard is ergonomically designed and contains an intercom speaker, microphone, volume controls and emergency stop switch.</p> <p>The HDx User Interface leverages the Linux computer platform to enhance productivity through single-screen prescription for most protocols and includes Secure Coil Connect, that eliminates coil connection errors, ProtoCopy, that facilitates the development and rapid transfer of scan protocols, and Vector Gating for highly reliable ECG triggering</p> <p>HDx ScanTools: The HDx ScanTools Package delivers a full range of pulse sequences and analysis software for whole-body imaging on the HDx technology platform. The core HDx ScanTools package includes the spin echo, fast spin echo, gradient echo, fast gradient echo, time-of-flight, phase contrast and echo planar pulse sequence suites along with FuncTool, ClariView, Multi-planar Volume Reformat and Interactive Vascular Imaging analysis packages. GE's unique SAR approaches, such as VERSE and MART are also included. Additionally, this special offering of HDx ScanTools includes specialized applications: iDrivePro Plus, EchoPlus, GEM, ASSET, BRAVO, 2D MERGE, SmartPrep, SmartStep, FTMRA, 2D FIESTA, 3D FIESTA, FIESTA-C, 3D FAT SAT FIESTA, Double-Triple IR-FSE, ConnectPro, and GE's exclusive LAVA body imaging. Expanded descriptions follow:</p> <p>ScanTools Core Features: The core pulse sequence suites in HDx ScanTools provide sequences with broad clinical applications value as well as sequences optimized for specific clinical applications. The post-processing and analysis packages complement the pulse sequence families with tools that enable the optimization of image quality or quantitative analysis.</p> <p>SpinEcho and Fast Spin Echo are fundamental pulse sequence suites that enable the generation T1W, T2W and PDW contrast images. Fast Spin Echo uses an echo-train to collect multiple lines of data per repetition in order to reduce scan time as compared to standard SE, and as a result has expanded capability: T1W, T2W and PDW contrast images can be generated along with specialized T1W FLAIR and T2W FLAIR contrast. The FSE suite encompasses multiple techniques that enable optimized 2D and 3D imaging as well as single-shot and multi-shot imaging with</p>

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Quotation Number: P5-C8461 V 3

Qty	Catalog No.	Description
		<p>increased slice coverage and minimal edge blurring. Fast Recovery techniques enable rapid T2W image, and inversion recovery techniques enable fluid suppressed T1 FLAIR, and T2 FLAIR imaging with enhanced gray and white matter contrast.</p> <p>Gradient Echo and Fast Gradient Echo use short TR, short TE, variable flip angles and gradient refocusing to reduce scan time. Fast Gradient echo techniques further speed imaging with fractional RF and fractional readout. T1W, T2*W and PDW contrast images can be rapidly generated in 2D and 3D modes. The GRE suite encompasses multiple techniques that enable the optimization of contrast. Spoiler pulses enable optimized T1W imaging and Steady-State-Free-Precession enables fluid sensitive, heavy T2*W imaging. Dual echo enables fat/water in-phase and out-of-phase imaging in a single acquisition, and SPECIAL enables fat suppression for 3D T1W imaging.</p> <p>Time-of-Flight is a gradient echo based suite of sequences optimized to exploit flow-related enhancement. The TOF suite uses short TR, short TE, variable flip angles and gradient refocusing to both reduce scan time and capture signal from flowing blood. Fast TOF techniques further speed imaging with fractional RF and fractional readout. TOF techniques enable optimized 2D and 3D imaging, 2D gated imaging, as well as Spoiler pulses for arterial flow enhancement.</p> <p>Phase contrast is a gradient echo based suite of sequences optimized to exploit flow-related enhancement and extract velocity and directional flow information. The PC suite uses short TR, short TE, variable flip angles and gradient refocusing to both reduce scan time and capture signal from flowing blood or CSF as well as Velocity Encoding pulses to encode flow direction and speed. PC techniques enable optimized 2D, 3D and Fastcine imaging.</p> <p>Echo planar collects multiple segments of image data from a spin echo or gradient echo sequence and enables ultra-fast imaging. The EPI suite encompasses multiple techniques that enable optimized 2D and 3D imaging as well as single-shot and multi-shot imaging. Inversion recovery techniques enable fluid suppressed T2 FLAIR imaging.</p> <p>FuncTool enables advanced post-processing for a broad range of MR applications. The suite of algorithms includes ADC and eADC mapping for diffusion imaging, and correlation coefficients for functional brain imaging. In addition, for contrast enhanced imaging the suite provides negative and positive enhancement integrals, signal enhancement ratio, maximum slope increase, maximum difference function and difference function. If PROBE and/or PROSE Spectroscopy are purchased, the FuncTool CSI options activate. If Diffusion Tensor Imaging is purchased, the FuncTool DTI options activate.</p> <p>Clariview is a post-processing tool that uses a state-of-the-art adaptive filter algorithm to reduce noise and sharpen edges in MR images. The filter tool enables the user to select different levels of noise reduction and edge sharpening to enhance image display</p> <p>Multi-planar Volume Reformat is a post-processing tool that enables the manipulation of 3D</p>

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Quotation Number: P5-C8461 V 3

Qty	Catalog No.	Description
		<p>volumetric MR data sets. The reformat tool enables the user to prescribe alternative viewing planes and volume thickness than the original scan plane and thickness. MPVR may enable the ability to reduce the number of total scans.</p> <p>Interactive Vascular Imaging is a post-processing tool that enables the removal of the background from MRA images. The IVI tool is embedded in MPVR and enables the user to generate maximum or minimum intensity projections in multiple viewing planes to enhance viewing of MRA images.</p> <p>VERSE and MART are innovative ways to reduce SAR with the FSE, FRFSE and SSFSE pulse sequence families. Through RF management (and not compromising image quality nor T1 and T2 contrast) VERSE and MART provide up to a 60% reduction in SAR when compared with conventional approaches. The results? Slice coverage where you need it, with uncompromised scan parameter selection.</p> <p>ScanTools Enhanced Features: The HDx ScanTools package also provides optimized applications that further enhance clinical utility or make specific applications easier to perform. iDrivePro and iDrivePro Plus provides real-time interactive MR imaging that makes it easier to optimize and streamline scan prescription. The iDrive tool uses the 2D FGRE/FSPGR sequence and allows the user to change-on-the-fly geometric and image contrast scan parameters. Results can be evaluated immediately and bookmarked or saved.</p> <p>Scan locations can also be easily exported to pre-programmed protocols.</p> <p>Echoplus expands the Echo Planar suite enabling diffusion-weighted imaging for the detection of acute and hyper-acute stroke. EchoPlus uses motion sensing gradient pulses in three directions to generate isotropic diffusion-weighted images in conjunction with T2 FLAIR images. B-value selection ranges from 0 to 10,000 s/mm<sup>2</sup> providing the flexibility to balance diffusion sensitivity and background suppression. In addition, the DWI-EPI suite encompasses multiple techniques that enable single-shot and multi-shot imaging as well as multi-NEX capability and ASSET compatibility. Echoplus images can be post-processing in FuncTool.</p> <p>GEM (Generalized Encoding Matrix) Reconstruction: This 2D-acceleration technique allows acceleration in both phase-encoding and slice-select directions. The results include increased temporal resolution and improved spatial resolution and coverage for a given scan time.</p> <p>ASSET (Array Spatial Sensitivity Encoding Technique) is a parallel imaging technique that uses the geometry of multi-element coils to accelerate data collection and reduce RF deposition. As a result, the user may choose to reduce scan time, increase in-plane resolution, or increase slice coverage. ASSET is an option employed in conjunction with compatible pulse sequences that span a broad range of applications: 2D FGRE, eFGRE3D, 3D TOF-SPGR, 3D TOF-GRE, 2D-FSE-XL, 2D FRFSE, 2D-FSE-IR, SSFSE, 2D T1 FLAIR, 3D FLAIR and DW-EPI and Diffusion Tensor. ASSET benefits body imaging by reducing breath-hold time, vascular imaging by enhancing spatial and temporal resolution and diffusion imaging by reducing echo-train length and susceptibility</p>

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 General Electric Company  
 General Electric Company, GE Medical Systems

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Qty	Catalog No.	Description
		<p>artifact.</p> <p><b>BRAVO (BRAIn VOlume) Imaging:</b> This IR-prepared 3D Gradient Echo imaging technique affords isotropic, whole-brain coverage with 1x1x1mm resolution. Coupled with parallel imaging, this sequence produces superior gray-white matter contrast in just 2 to 3 minutes.</p> <p><b>2D MERGE (Multi-Echo Recombined Gradient Echo):</b> MERGE is a 2D imaging technique uniquely designed to image the C-spine. By acquiring and summing multiple gradient-echoes at various echo-times, MERGE improves gray-white matter contrast within the cord and provides excellent visualization of the neuroforaminal canals.</p> <p><b>SmartPrep</b> enables both automated bolus detection and automated bolus chasing for time-course vascular imaging. SmartPrep uses a special tracking pulse sequence positioned over a blood vessel volume by the user to monitor MR signal intensity changes. Data acquisition is automatically triggered when the threshold signal intensity is reached. SmartStep adds automated table stepping for multi-station time-course vascular exams. SmartStep integrates scout series, graphic prescription, PreScan ahead, automated bolus detection, table motion and coil switching. The SmartPrep suite is compatible with elliptic-centric encoding and ZIP reconstruction for optimum image quality</p> <p><b>FTMRA (Fluoro-Trigger MRA)</b> enables real-time monitoring and manual triggering for vascular time-course imaging. FTMRA allows the user to view real time images of the area of interest and then manually trigger data acquisition at the optimum time. The switch over takes less than one second. FTMRA eliminates the need to position a tracking pulse in areas that may prove challenging and puts the user in complete control of exam triggering.</p> <p><b>3D FIESTA and FIESTA-C (Fast Imaging Employing Steady-state Acquisition)</b> combines 3D volumetric data acquisition with fluid sensitive steady-state imaging. Tissues with a high ratio of T2/T1 such as CSF and blood have high signal intensity, and the 3D volumetric acquisition enables high resolution imaging of small structures such as the internal auditory canal, middle ear or joints. FIESTA-C adds phase cycling to the excitation pulse in order to minimize the build-up of artifacts in the residual transverse magnetization. Double-Triple IR-FSE adds inversion recovery pulse and chemical fat saturation capability to the Fast Spin Echo sequence for black-blood and morphological cardiac imaging. The inversion pulse is optimized to suppress blood flow artifact and can be used alone or in conjunction with chemical fat saturation. The addition of a chemical fat saturation pulse eliminates competing signal from fatty tissues surrounding the heart and coronary arteries.</p> <p><b>2D FIESTA (Fast Imaging Employing Steady-state Acquisition)</b> is a gradient echo technique that capitalizes on the residual transverse magnetization created by short TR to create images in which tissues with a high ratio of T2/T1 such as CSF and blood have high signal intensity. The result is fluid sensitive imaging, and this property yields high contrast between the blood and myocardium for cardiac imaging. <b>3D Fat Sat FIESTA (Fast Imaging Employing Steady-state</b></p>

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Qty	Catalog No.	Description
		<p>Acquisition) combines 3D volumetric data acquisition with fluid sensitive steady-state imaging and fat saturation for coronary artery imaging. The 3D volumetric acquisition enables high resolution imaging of small structures such as the coronary arteries in a short breath-hold time. The addition of a chemical fat saturation pulse eliminates competing signal from fatty tissues surrounding the coronary arteries. ConnectPro is designed to significantly improve productivity, reduce manual transcript errors, and synchronize scan options. ConnectPro enables the 3.0 DICOM worklist server class for the MR system. ConnectPro makes it possible to query a DICOM compatible HIS/RIS by name, modality, or schedule date and download patient demographics directly to scanner. The ConnectPro package also includes Performed Procedure Step, which automatically notifies the HIS/RIS and PACS systems of procedure status. Separate gateway hardware may be required to connect non-DICOM compatible HIS/RIS systems.</p> <p>LAVA (Liver Acquisition with Volume Acceleration) is a 3D spoiled gradient echo technique optimized for multi-phase liver imaging. LAVA combines in-plane ASSET acceleration (up to 2.5X), partial data filling (25%) and shortened TR to enable 25% higher resolution and 25% more coverage with 25% less scan time than previously possible. The acceleration techniques used by LAVA enable reduced scan time and extended coverage without compromising in-plane resolution, and the result is high quality axial and reformatted images. LAVA also uses an optimized inversion pulse and a view ordering technique that yields enhanced image contrast and robust, uniform fat suppression. As a result, LAVA enables reliable high quality liver imaging in short breath hold.</p> <p>Clinician Training: The system includes a clinical training voucher. The voucher entitles one Clinician to attend a GE sponsored MR Masters program. MR Masters programs are hosted and taught by leading Physicians who share their experience on use of the GE MR system for the acquisition and interpretation of MR image data. The voucher includes tuition and course materials. Travel and living expenses are the responsibility of the individual.</p>
1	M3335PF	<p>Signa HDx 3.0T Magnet and Gradient</p> <p>The revolutionary 3.0T Signa HDx superconducting magnet represents a true breakthrough in magnet design. It delivers everything that you demand from a high performance, 3.0T system a short and compact design, industry-leading homogeneity, a clinically relevant 45-cm imaging field of view, and a 60-cm bore to maximize patient comfort.</p> <p>By using two sets of actively shielded gradient coils integrated into a single subsystem, the innovative, GE-exclusive TwinSpeed Gradient Module virtually eliminates tradeoffs. Its Zoom mode offers outstanding performance for small-field imaging, with amplitudes up to 50 mT/m and a slew rate of 150 mT/m/ms. The Whole-Body mode, designed for larger FOVs, offers amplitudes of up to 23 mT/m and a slew rate of 80 mT/m/ms. The result is the high-performance speed and resolution demanded for high-definition MR, without compromising your ability to use a large FOV.</p>



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		Whats more,the TwinSpeeds exclusive Quiet Technology reduces by up to 40% the acoustic noise generated by gradient-pulse switching, helping patients remain comfortable. This noise reduction is accomplished without the slightest compromise in image quality.
1	M1060MA	<p>Vibroacoustic Damping Kit</p> <p>Material in the Vibroacoustic Damping Kit can significantly attenuate the transmission of gradient-generated acoustic noise through the building structure to nearby areas, including adjacent rooms and floors above or below the MR suite. The kit is compatible only with the short-bore 1.5T LCC or 3.0T magnets. If this kit is applied during the installation of a new magnet, no additional service charges are necessary. However, installation of the Vibroacoustic Damping kit under an existing magnet requires special steps. The steps to prepare the site and steps to install, such as modifications to the RF screen room, and other magnet rigging, modifications to the RF screen room, and other finishing work, are not covered in the pricing.</p>
1	M3335NY	<p>Signa HDx 3.0T Phased Array Cables (Config A)</p> <p>This is a required collection of high performance phased array cables engineered specifically for the Fixed Site 3.0T HDx system.</p>
1	S7502TZ	<p>MR Accessories Kit</p> <p>The Accessories Kit combines a physician's chair, a complete set of positioning pads, and a set of Velcro security straps.</p> <p>The Physician's Chair has padded arms for comfort and comes in a charcoal gray color that blends with any environment.</p> <p>The MR Accessories Kit contains a complete set of coated positioning pads in a lightweight tote case that can be a permanent fixture in an MR suite or can be easily carried from room to room. The following pads are included: 1 knee rest, 1 knee coil insert, 1 extremity rest, segment table pads, 4 body wedges, 4 rectangle stack pads, and 2 rectangle elbow pads.</p> <p>The Velcro Security Straps include one 14 inch wide set and one 6 inch wide set.</p>
1	S7502Y	<p>10 kW Chiller Package - Quantity 2</p> <p>Cooling of both the coldhead and the gradients requires two separate chillers. The air-cooled chiller consists of a refrigeration unit, coolant reservoir and pump contained within an enclosure that allows the unit to be operated indoors or outdoors. There is a remote panel that can stop or restart the chiller as well as display water temperatures. This remote panel can be placed in the equipment room to provide complete and convenient control over a chiller installed outdoors. Operates at either 50Hz or 60Hz.</p>
1	M3088TM	Twin,3.0T,or HDe Disconnect Panel

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Qty	Catalog No.	Description
		Electrical storms and power losses are no problem when this disconnect panel is in place. It safeguards your MR system's critical electrical components, by providing complete power distribution and emergency-off control.
1	S7502WN	<p>3.0T HDx Advanced Neuro Imaging Package</p> <p>The HDx Advanced Neuro Imaging Package combines PROPELLER, 3D FLAIR, Diffusion Tensor Imaging, FiberTrak and 3D COSMIC for optimized Neuro imaging.</p> <p>PROPELLER (Periodically Rotated Overlapping Parallel Lines with Enhanced Reconstruction) is a revolutionary data collection technique used in conjunction with the Fast Spin Echo pulse sequence. The data creates images with unusually high contrast-to-noise ratio as well as makes the sequence insensitive to motion artifacts on T2 and T2 FLAIR sequences and insensitive to susceptibility artifacts on DWI sequences. The result is high quality T2 and T2 FLAIR images of the brain even when the patient fails to remain still, and high quality DWI images in the presence of dental work or surgical hardware.</p> <p>Powered by ASSET (GE's parallel imaging), 3D FLAIR provides FLAIR-weighted contrast in a 3-dimensional, isotropic acquisition. 3D FLAIR has many advantages over conventional 2D approaches. Thinner slice thicknesses are possible - and the isotropic volume acquisition means that the data can be reformatted into any plane after the first acquisition, with absolutely no loss in spatial resolution.</p> <p>Diffusion Tensor imaging creates contrast based on the degree of diffusion anisotropy in cerebral tissues such as white matter. DTI builds on the EchoPlus sequence using motion sensing gradient pulses along 6 to 55 orientations in order to generate component images. On the operator console, FuncTool provides algorithms to generate Fractional Anisotropy (FA) Maps and Volume Ratio Anisotropy (VRA) Maps.</p> <p>FiberTrak is a post-processing tool that expands the post-processing capability of FuncTool DTI and enables the generation of 2D color orientation maps, 2D eigenvector maps, and 3D Tractography maps using Diffusion Tensor image data. With FiberTrak the 3D volume viewer permits the depiction of areas of high fractional anisotropy (typically white matter tracks) to be displayed and manipulated. This version of FiberTrak loads on the operator console.</p> <p>COSMIC (Coherent Oscillatory State acquisition for Manipulation of Image Contrast) is a 3D imaging technique specifically tailored to C-spine studies. Its unique fluid-weighted contrast yields improved visualization of the cervical nerve roots and intervertebral disks.</p>
1	M3335KJ	<p>LAVA (Liver Acquisition with Volume Acceleration)-XV:</p> <p>Compared to conventional techniques, LAVA-XV is a more reliable and robust approach to high-resolution liver imaging, providing more extensive coverage without time penalty. By employing multi-dimensional parallel imaging and GEM reconstruction, LAVA-XV produces 3D image volumes extending from liver dome to pelvis in a single breath-hold. By over-sampling the</p>

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Qty	Catalog No.	Description
		center of k-space, this acquisition technique embeds the calibration data within the image data, ensuring a robust parallel-imaging reconstruction free of breathing artifacts. Its unique variable density sampling approach is what eliminates time penalties for the self-calibrated acquisition. The clinical result: Outstanding, high-resolution imaging, patient after patient.
1	M3335LT	<p>3.0T HDx VIBRANT-XV</p> <p>VIBRANT (Volume Imaged BREast Assessment) is a 3D gradient echo technique optimized for multi phasic sagittal or axial breast imaging. VIBRANT uses ASSET acceleration to accelerate data acquisition without compromising spatial detail. VIBRANT-XV enables either direct sagittal or axial acquisition with high temporal and high spatial resolution. For sagittal imaging, VIBRANT uses ASSET (up to 2X) in the slice direction to acquire both breasts in the scan time of one. For axial imaging, VIBRANT uses in-plane ASSET (up to 3X) to enable higher matrix selection to offset the larger FOV. VIBRANT also uses an optimized inversion pulse and dual shimming that yields enhanced image contrast and robust, uniform fat suppression. Auto-subtraction is also available to further optimize background suppression. As a result, VIBRANT enables reliable, high quality breast imaging.</p>
1	M3033MH	<p>TRICKS</p> <p>TRICKS (Time Resolved Imaging of Contrast KineticS) uses segmented temporal sampling and complex data recombination to accelerate 3D dynamic vascular imaging without compromising spatial detail. TRICKS also uses elliptic centric data collection for optimized contrast resolution and auto-subtraction for optimized background suppression. The result is time course imaging that does not require timing or triggering, provides high temporal and high spatial resolution, and enables the extraction of optimum phases of data. As a result, TRICKS enables reliable, high quality vascular imaging.</p>
1	M3335KY	<p>CartiGram T2 Cartilage Mapping</p> <p>T2 cartilage mapping is a non-invasive imaging method for early detection of osteoarthritis. The imaging results are color mapped to indicate whether or not the cartilage structure is breaking down and, if so, to what extent. This information can be used to determine the best course of treatment for the individual patient. In addition, it can be used to monitor the cartilage post-treatment, obviating the need for follow-up arthroscopic surgeries or biopsies.</p>
1	F7002MR	<p>3.0T 16-Channel HDx Head/Neck/Spine Array-GE</p> <p>The Head/Neck/Spine (HNS) array delivers convenience without compromise. Compatible with new 16-channel HDx MR systems, this 29-element coil serves as a high-resolution brain coil, high-density neuro-vascular array, and a multi-element spine coil in one convenient package. Designed to accommodate multi-dimensional parallel imaging in any scan plane, this coil yields both unprecedented imaging speed and superior image quality, thanks in large part to a unique element arrangement that focuses the signal over the anatomy of interest.</p>

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Qty	Catalog No.	Description
		<p>This quote includes a future product delivery commitment by GEHC for the above specified product(s). Customer is responsible for downtime, if any, associated with the installation of the product(s) ordered under this commitment. If customer has a service contract with GEHC, customer is also responsible for any changes to service contract pricing due to the installation of the product(s) ordered under this commitment. This commitment is expressly limited to the above specified product(s) that are FDA-cleared, but not yet commercially available. Customer shall not be entitled to any refund in connection with this commitment and no monies may be allocated to any product(s) except the product(s) specified by this commitment. Customer is responsible for the proper accounting for all payments made in the manner required under any state or federal program which provides reimbursement to the customer for or related to any products or services provided under this agreement. Amounts paid by customer under this agreement may include payments toward future acquisitions by customer under the terms and conditions of this agreement. Before order entry, GEHC may remove the future product delivery commitment catalog number item(s) from this order and create a separate order for such catalog number item(s). However, payment terms shall remain the same as originally stated in the quotation and payment for the future product delivery commitment catalog number item(s) shall be included with the payment for the original order.</p>
1	M3335LN	<p>3.0T 8-Channel HDx Torso Array - GE Coils</p> <p>The 8-channel Torso Array coil generates outstanding, high-resolution images of the thorax, abdomen, MRCP, and pelvis, including the prostate. ASSET-optimized, it offers extended coverage in each direction - 35 cm S/I, 34 cm R/L, and 30 cm A/P.</p>
1	M3335LA	<p>3.0T 8-Channel HD and HDx Breast Array-GE Coils</p> <p>The Breast Array generates high-definition MR breast images on both 8 and 16-channel 3.0T HD &amp; HDx G3 systems. Optimized for use with ASSET and VIBRANT for up to 3X acceleration, this 8-element phased-array coil helps ensure excellent temporal and spatial resolution, patient after patient. The array is also compatible with Fast Spin Echo, Fast Gradient Echo, and Diffusion Imaging sequences. It provides uncompromised lateral and medical biopsy access.</p>
1	M3335LR	<p>3.0T HDx Shoulder Array - GE Coils</p> <p>The 3-Ch HDx Shoulder Array takes orthopedic scanning to new performance levels. Designed to fit a large range of patients and optimized for off-center FOV imaging, this shoulder coil delivers homogenous and exquisite image quality.</p>
1	M3335LB	<p>3.0T 8-Channel HD/HDx Knee Array</p> <p>The HD/HDx Knee Array is designed for high-definition MR knee imaging on 8- or 16 channel 3.0T HD and HDx systems. This 8-element transmit/receive coil employs unique hybrid technology, using separate coils for transmit and receive functions. Designed uniquely for GE, it</p>

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Qty	Catalog No.	Description
		delivers more SNR than the standard extremity coil. And it's compatible with PURE for uniform signal intensity and ASSET for accelerated imaging speed.
1	S7505TP	<p>3.0T HD 8-Channel Neurovascular Array</p> <p>This 8-channel, open design NV Array comes with a patient adaptable, chest portion; optimizing image quality, while maximizing patient comfort. This coil delivers the capability to perform combined head-and-neck imaging without repositioning your patients and delivers coverage from aortic Arch to circle of Willis. The result: improved patient throughput for a wide range of soft-tissue neck, skull-base and brain studies, in a coil that is completely ASSET optimized. This coil will ship to you in the event the Head, Neck, Spine (HNS) coil is not available to ship prior to the turn-over of your equipment. You can utilize this coil until the HNS coil ships to you. If the HNS coil becomes available prior to turnover of your equipment this coil will be deleted from your order. Once the backordered Head, Neck, Spine coil ships you have the option of keeping this coil for a nominal charge or you may return the coil no charges will be applied.</p>
1	S7505TR	<p>3.0T 8-Channel HD CTL Spine Array - GE Coils</p> <p>This 8-channel, multi-station array delivers extraordinarily high SNR and spatial resolution over the entire spine, as well as in soft-tissue neck and carotid studies. The HD Spine Array is packaged to conform to the spine's normal curvature; it comes complete with patient comfort pad and restraint. This coil will ship to you in the event the Head, Neck, Spine (HNS) coil is not available to ship prior to the turn-over of your equipment. You can utilize this coil until the HNS coil ships to you. If the HNS coil becomes available prior to turnover of your equipment this coil will be deleted from your order. Once the backordered Head, Neck, Spine coil ships you have the option of keeping this coil for a nominal charge or you may return the coil no charges will be applied.</p>
1	S9200MP	<p>MR Fast Start Package includes:</p> <ul style="list-style-type: none"> <li>• 4 E8801BA Disposable Earplugs</li> <li>• 1 E8000EB TDK 2.3 Gb MOD's</li> <li>• 1 E8807AB Signa Log Books</li> <li>• 1 E8819RG Conmed Electrodes</li> <li>• 1 E8802MC Wide Security Straps</li> <li>• 1 E8802MD Narrow Security Straps</li> <li>• 1 E8801MR Head Coil Set</li> <li>• 2 E8819A MR Warning Sign - Large</li> <li>• 10 E8819B MR Warning Sign - Small</li> <li>• 1 E8804EF MR Safety Video ..H</li> </ul>

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Qty	Catalog No.	Description
1	S7502TZ	<p>MR Accessories Kit</p> <p>The Accessories Kit combines a physician's chair, a complete set of positioning pads, and a set of Velcro security straps.</p> <p>The Physician's Chair has padded arms for comfort and comes in a charcoal gray color that blends with any environment.</p> <p>The MR Accessories Kit contains a complete set of coated positioning pads in a lightweight tote case that can be a permanent fixture in an MR suite or can be easily carried from room to room. The following pads are included: 1 knee rest, 1 knee coil insert, 1 extremity rest, segment table pads, 4 body wedges, 4 rectangle stack pads, and 2 rectangle elbow pads.</p> <p>The Velcro Security Straps include one 14 inch wide set and one 6 inch wide set.</p>
1	E8804SB	<p>Medrad Spectris Solaris EP MR Injection System</p> <p>Medrad Spectris Solaris EP MR injector for use use in all MR scanner field strengths up to and including 3.0T. Optimized touch-screen for fewer keystrokes, KVO (keep vein open) allows patient to be prepared before beginning the scan. Larger 115 ml saline syringe for longer KVO or multiple flushes. Includes cables and starter kit...E</p> <p>NOTE: GE is responsible for unpacking, assembly, and installation of equipment. Medrad will be available for technical assistance by phone at (412)767-2400. An additional charge will apply for on-site installation assistance. Medrad will be responsible for operational checkout, final calibration, in-service of the equipment, and initial applications training. Please contact the local Medrad office two weeks in advance of installation.</p>
1	E8804ST	Medrad Spectris Solaris Contrast Pedestal Holder (referred to as an IV Pole). Part #: CHD 100 MR; Sold per Each.
1	E8823M	<p>Magnacoustics Genesis IV Music System for MRI</p> <p>Magnacoustics Genesis IV music system for MRI provides comfort to the patient during the procedure. Includes patient volume and selection controls with voice feedback for maximum comfort. Backlit technologists control unit allows operation of entire system with a touch of the button. Built-in intercom allows communication with the patient even while scan is in progress. Includes complete AM-FM stereo, dual cassette deck, and 50-CD changer. Installation provided by GE...E</p>
1	E8800R	<p>3.0T HDx G3 Small Extremity Wrist Coil</p> <p>The Mayo Clinic 3.0T HDx Small Extremity Wrist Coil is a Transmit/Receive quadrature coil that has been optimized for specialty high-resolution musculoskeletal imaging. This design is notable for its demonstrated long-term reliability, low transmit RF power, high image uniformity, and high image SNR. The coil dimensions are approximately 10 cm diameter and length. Includes:</p>

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Qty	Catalog No.	Description
		wrist coil, phantom, load phantom alignment rings, operator's manual and service manual. Warranty Code: A
1	E8823JB	MR Dielectric Pad Set-Includes 1 Neck Pad and 1 Abdomen Pad  These soft and flexible dielectric pads are used to suppress shading artifacts that can sometimes be encountered at higher 3.0T field strengths, and especially when imaging in the cervical spine and abdomen and pelvis. Covered with a patient friendly outer cover, the neck pad is placed inside the coil, and under the patient's neck, while the abdomen pad is placed over the patient's abdomen or pelvis and under the front portion of the torso array coil.
2	M1099MD	MR Masters Voucher  The MR Masters Voucher entitles one clinician to attend one MR Masters program within one year of system transfer. Courses are listed on the GE Healthcare website at <a href="http://www.gehealthcare.com/us/en/mr/education/products/physiciantrain.html">http://www.gehealthcare.com/us/en/mr/education/products/physiciantrain.html</a> . Courses are scheduled at various times throughout the year and course selection is subject to change. Course length varies from 1 day to 5 days -- there is no rebate if a shorter course is selected. The voucher covers tuition only for the attendee (regardless of course length) and does not include travel and living expenses which are the responsibility of the attendee.
1	W0101MR	TiP Applications 1.5T or 3T Succeed Elite  TiP Applications 1.5T or 3T Succeed Elite training includes: <ul style="list-style-type: none"> <li>• 19 onsite days covered over 7 site visits</li> <li>• 12 Hrs TVA, 1 hr per week over 12 weeks starting 6-8 weeks post install</li> <li>• 2 TiP Headquarter Classes</li> </ul> All elements of the programs are completed within 6 months post installation.  Onsite training and TVA are delivered Monday through Friday between 8AM and 5PM. T&L expenses are included. Headquarter classes are delivered in the Milwaukee area and include travel and modest living expenses.
1	W0951MR	MR AW TiP Virtual Assist 10 Hrs  10 hours of remote MR AW Workstation training using TiP Virtual Assist. Requires broadband connection with customer upload speed of at least 400 kbps.

## Quote Summary:

Total Quote Net Selling Price

\$2,981,766.00

(Quoted prices do not reflect state and local taxes if applicable)





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If you would like to place an order for this equipment, a formal contract document will be prepared for your consideration. This quote is for budgetary use only; only a GE contract can become a binding order.

### Options

(These items are not included in the total quotation amount)

Qty	Catalog No.	Description	List Price
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1	M80521VE	AW VolumeShare with Two Flat Panel Monitors and 4GB of RAM	\$100,000.00
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AW VolumeShare provides 3D visualization and analysis with exceptional stability, quality and flexibility for powerful multi-modality image management, review, comparison and processing.

The AW software family improves diagnostic/treatment workflow and enhances clinician-patient communication. AW VolumeShare software includes:

- Volume Viewer 2: GE 3D software package that includes Volume Rendering, Volume Analysis, Navigator and other 3D visualization and analysis tools
- Advanced X-ray Analysis: Accommodates routine and special procedures, providing tools specifically for the review of DICOM x-ray images.
- 2D image viewer that displays RT, CT, MR, CR X-Ray (Angio and R&F), Digital X-Ray (DX), MG, NM, PET, U/S, Secondary Capture, Secondary Capture Color DICOM Image Objects
- Filmer: Multimedia export tool that creates standard or free-format electronic films in DICOM SR that can be saved, networked or printed to a DICOM, DICOM color or a supported postscript printer. Electronic films can also be exported out of the DICOM environment in a variety of multimedia formats (HTML, PDF, JPEG, PNG, MPEG, AVI, QuickTimey VR).

AW VolumeShare ships with:

- AW4.3 post-processing software platform, Patient List, database, and DICOM networking
- Volume Viewer 2(VA, VR, Navigator)
- 2D Viewer
- Filmer

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Qty	Catalog No.	Description	List Price
		<ul style="list-style-type: none"> <li>• Data Export</li> <li>• Advanced X-ray Analysis</li> <li>• Two 19" flat panel monitors</li> <li>• HP xw8200 Workstation: <ul style="list-style-type: none"> <li>- Dual Intel Xeon Processor 2 x 3.4GHz CPU clock speed, 1MB cache per CPU</li> <li>- 4GB DDR-2 RAM (expandable to 6GB)</li> <li>- 2 x 73 GB: Ultra320 SCSI 15,000rpm hard disks (144 GB can be used for image storage)</li> <li>- 1 x 36 GB: Ultra320 SCSI 15,000rpm hard disk for OS and system files</li> <li>- Internal DVD-ROM drive with CD burner (40x read/write) for DICOM media interchange and writing of DataExport electronic films</li> <li>- 10/100/1000 base-T network interface</li> <li>- USB Optical 3-button mouse</li> <li>- 3 inch floppy drive for service use and preset archive capability</li> </ul> </li> </ul> <p>DOES NOT INCLUDE AUTOBONE SOFTWARE (M80501AB) OR ANY OTHER ADVANCED APPLICATIONS NOT LISTED HERE.</p>	
1	M80501AB	<p>AutoBone Software Option for AW 4.1/4.2/4.2P</p> <p>AutoBone is an exclusive image analysis software package that facilitates segmentation of bony structures from ABDOMINAL and LOWER EXTREMITY CT Angiography data.</p> <p>AutoBone requires the AW Volume Viewer to run, complementing the existing suite of AutoSelect tools.</p> <p>AutoBone Clinical Benefits:</p> <ul style="list-style-type: none"> <li>• One-click segmentation of bony structures.</li> <li>• Facilitates vessel feature visualization.</li> </ul> <p>Operator Productivity Benefits Include:</p> <ul style="list-style-type: none"> <li>• Decreased time to first clinically relevant image.</li> <li>• Identification and segmentation of bony structures providing a quick 3D MIP overview of vascular structures.</li> <li>• AutoSelect sigmentation tools may be used to refine sigmentation by quickly adding or removing data to achieve desired results.</li> <li>• The resulting VR image can be manipulated to view vessels only, or</li> </ul>	\$15,000.00

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		transparent bone can be restored for landmarks.	
		System Requirements:	
		<ul style="list-style-type: none"> <li>Volume Viewer for the Advantage Workstation.</li> </ul>	
1	M10501MP	MR Pasting For AW 4.1/4.2/4.2P	\$25,000.00
		MR Pasting is an image analysis software package that facilitates the display and filming of multiple station MR data sets in body applications (total spine, total body), as well as peripheral MR angiography data.	
		MR Pasting will automatically register and combine multiple acquisition stations into a single image of covered anatomy.	
		MR Pasting is an optional feature on Advantage Workstation 4.1 and higher.	
		Clinical Benefits Include:	
		<ul style="list-style-type: none"> <li>Registration of up to 10 acquisition stations.</li> <li>Registration based on table coordinates and a rigid body fitting to correct for patient motion and table position errors.</li> <li>User validation of pasting results.</li> <li>Pasted dataset is saved a new DICOM image set that may be exported or printed.</li> </ul>	
		Operator productivity benefits include:	
		<ul style="list-style-type: none"> <li>Immediate operation in obtaining the combined images.</li> <li>Automated processing that is NOT user dependant.</li> </ul>	
		System Requirements:	
		<ul style="list-style-type: none"> <li>AW 4.1/4.2/4.2P</li> </ul>	
1	M30331P	Brainwave Post Acquisition 2.0 for AW	\$55,000.00
		BrainWave PA 2.0 is a post-processing tool that enables analysis and visualization of functional brain image data acquired with BrainWave RT. Multiple regression analysis is used to generate maps corresponding to a task. Supplemental analysis capabilities include data-quality check motion correction, temporal filtering and spatial smoothing capabilities. Visualization techniques permit combining analysis with segmented anatomical image data. This version of BrainWave PA loads on the AW.	
1	M10331ND	FuncTool Performance for Advantage Workstation 4.1/4.2/4.2P.	\$50,500.00

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		<p>FuncTool Performance arms you with multiple algorithms to perform advanced post-processing of MR images - and to display the results in a range of formats, from time-intensity curves to parametric color overlays to metabolite-ratio maps. Among the most important of these capabilities:</p> <ul style="list-style-type: none"> <li>• eADC maps</li> <li>• Correlation Coefficients for mapping of motor strip and visual/auditory stimuli</li> <li>• NEI (Negative Enhancement Integral)</li> <li>• MTE (mean time to enhance)</li> <li>• Positive Enhancement Integral</li> <li>• Signal Enhancement Ratio</li> <li>• Maximum Slope Increase</li> <li>• Maximum Difference Function</li> <li>• Difference Function</li> <li>• Diffusion Tensor Post-Processing (requires Diffusion Tensor option)</li> </ul>	
1	M10331NE	<p>FuncTool CSI for AW 4.1/4.2 and 4.2P</p> <p>FuncTool CSI Adds 3D Spectroscopy Post-Processing Capability to the Basic FuncTool Package. This Package is Compatible with 3D PROBE and 3D PROSE Spectroscopy Data Sets and Requires FuncTool Performance on the AW 4.1/4.2/4.2P Workstation.</p>	\$25,000.00
1	M10331NF	<p>FuncTool DTI for AW 4.1/4.2 and 4.2P</p> <p>FuncTool DTI Adds Diffusion Tensor Post-Processing Capability to the Basic FuncTool Package. This Package is Compatible with Diffusion Tensor Data Sets, and Requires FuncTool Performance on the AW 4.1/4.2/4.2P Workstation.</p>	\$15,000.00
1	M30331NM	<p>FiberTrak for AW</p> <p>FiberTrak is software for processing images generated with the optional diffusion tensor imaging pulse sequence to create 3-dimensional maps portraying anisotropic water diffusion. Such maps depict white matter tracts in the brain and are intended for use in surgical planning. The maps can be produced quickly on the Advantage Workstation through a robust and efficient seeding process.</p>	\$20,000.00
1	M3333WK	<p>PROBE 3D CSI</p> <p>This option extends your PROBE-P 2D CSI spectroscopic capabilities by</p>	\$50,500.00

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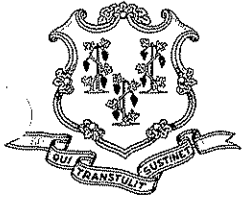


Quotation Number: P5-C8461 V 3

Qty	Catalog No.	Description	List Price
		allowing you to perform 3-dimensional multi-voxel acquisitions. Post-processing, including the creation of metabolite maps, is automatically generated with the FuncTool Performance Package (included as part of ScanTools).	
1	M3334TS	3.0T HD and HDx Cardiac Array  This 3.0T HD/HDx Cardiac Array is designed for whole-heart imaging on 3.0T Signa HD and HDx systems. The coil has been optimized for the use of ASSET (GE's parallel imaging approach) with double oblique scan planes, enabling the fast acquisition times that are essential for high quality cardiac MR procedures.	\$40,400.00

(Quoted prices do not reflect state and local taxes if applicable)





M. JODI RELL  
GOVERNOR

**STATE OF CONNECTICUT**  
OFFICE OF HEALTH CARE ACCESS

CRISTINE A. VOGEL  
COMMISSIONER

May 3, 2007

Mark Grossman  
Chief Executive Officer  
Jefferson Radiology, P.C.  
111 Founders Plaza  
Suite 400  
East Hartford, CT 06108

RE: Certificate of Need Application Forms, Docket Number 07-30958-CON  
Jefferson Radiology, P.C.  
Acquisition of 3T MRI in Farmington

Dear Mr. Grossman:

Enclosed are the application forms for Jefferson Radiology, P.C., LLC's Certificate of Need ("CON") proposal for the acquisition of a 3T MRI in Farmington with an associated capital expenditure of \$3,525,872. According to the parameters stated in Section 19a-638 of the Connecticut General Statutes the CON application may be filed between June 23, 2007, and August 22, 2007.

**When submitting your CON Application, please paginate and date each page contained in your submission. In addition, please submit one (1) original and three hard copies; as well as a scanned copy of the complete Application, including all attachments, on CD or Diskette. OHCA requests that the electronic copy be in Adobe or MS Word format and that the Financial Attachment and other data as appropriate be in MS Excel format.**

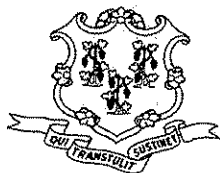
The analyst assigned to the CON application is Paolo Fiducia. Please feel free to contact him at (860) 418-7001, if you have any questions.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kim Martone".

Kimberly Martone  
Certificate of Need Supervisor

Enclosures



## **State of Connecticut Office of Health Care Access Certificate of Need Application**

Please complete all questions. If any question is not relevant to your project, Not Applicable may be an acceptable response. Your Certificate of Need application will be eligible for submission no earlier than June 23, 2007, and may be submitted no later than August 22, 2007. The Analyst assigned to your application is Paolo Fiducia and may be reached at the Office of Health Care Access at (860) 418-7001.

**Docket Number:** 07-30958-CON

**Applicant(s) Name:** Jefferson Radiology, P.C.

**Contact Person:** Mark Grossman  
**Contact Title:** Chief Executive Officer  
Jefferson Radiology, P.C.

**Contact Address:** 111 Founders Plaza  
Suite 400  
East Hartford, CT 06108

**Project Location:** Farmington

**Project Name:** Acquisition of 3T MRI in Farmington

**Type proposal:** Section 19a-639, C.G.S.

**Est. Capital Expenditure:** \$3,525,872

**1. Expansion of Existing or New Service**

What services are currently offered at your facility that the proposed expansion or new service will augment or replace? Please list.

Augment: \_\_\_\_\_

Replace: \_\_\_\_\_

**2. State Health Plan**

No questions at this time.

**3. Applicant's Long Range Plan**

Is this application consistent with your long-range plan?

☐ Yes ☐ No

If "No" is checked, please provide an explanation.

**4. Clear Public Need**

- A. Explain how it was determined there was a need for the proposed **3T MRI** in your service area.
- B. Provide the following information:
  - a) The population to be served, including the number of individuals to receive the proposed service. Include demographic information, as appropriate.
  - b) Scheduling backlogs in service area
  - c) Travel distance from proposed site to service area towns
  - d) Hours of operation of proposed service
- C. Identify the existing providers of the proposed service in your service area.
- D. What will be the effect of your proposal on existing providers (i.e. patient volume, financial stability, quality of care, etc.)?
- E. Provide the units of service projected for the first three years of operation of the proposed service. **Include all assumptions used in the derivation/calculation of your projections.**



F. Provide the information as outlined in the following table concerning the existing providers' in the Applicant PSA &SSA current operations:

Description of Service <sup>1</sup>	Provider Name and Location	Hours and Days of Operation <sup>2</sup>	Current Utilization <sup>3</sup>

<sup>1</sup> If proposal concerns imaging equipment, provide a description of the equipment used by the Provider, if known. For MRI scanners, include Tesla strength, and whether or not the scanner is considered to be "open" or "closed".

<sup>2</sup> Specify days of the week and start and end time for each day.

<sup>3</sup> Number of scans performed on specified scanner by Provider for the most recent 12 month period, if known.

G. Will your proposal remedy any of the following barriers to access? Please provide an explanation.

- |  |   |
|--|---|
| <input type="checkbox"/> Cultural          | <input type="checkbox"/> Transportation         |
| <input type="checkbox"/> Geographic        | <input type="checkbox"/> Economic               |
| <input type="checkbox"/> None of the above | <input type="checkbox"/> Other (Identify) _____ |

If you checked other than None of the above, please provide an explanation.

H. Provide copies of any of the following plans, studies or reports related to your proposal:

- |  |  |
|--|--|
| <input type="checkbox"/> Epidemiological studies   | <input type="checkbox"/> Needs assessments     |
| <input type="checkbox"/> Public information reports  | <input type="checkbox"/> Market share analysis |
| <input type="checkbox"/> Other (Identify) _____  |  |
| <input type="checkbox"/> None: <i>explain</i> why no reports, studies or market share analysis was undertaken related to the proposal: |  |

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## 5. Quality Measures

- A. Check off all the Standard of Practice Guidelines that will be utilized by the Applicant for the proposed service. Please submit the most recent copy of each report related to the proposal:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> American College of Cardiology                     | <input type="checkbox"/> National Committee for Quality Assurance          | <input type="checkbox"/> Public Health Code & Federal Corollary                            |
| <input type="checkbox"/> National Association of Child Bearing Centers      | <input type="checkbox"/> American College of Obstetricians & Gynecologists | <input type="checkbox"/> American College of Surgeons                                      |
| <input type="checkbox"/> Report of the Inter-Council for Radiation Oncology | <input type="checkbox"/> American College of Radiology                     | <input type="checkbox"/> Substance Society Abuse and Mental Health Services Administration |

☐ Other: Specify \_\_\_\_\_

- B. Describe in detail how the Applicant plans to meet the each of the guidelines checked off above.

- C. Submit a list of **all** key professional and administrative personnel, including the Applicant's Chief Executive Officer (CEO) and Chief Financial Officer (CFO), Medical Director, physicians, nurses, therapists, counselors, etc., related to the proposal and a copy of their Curriculum Vitae.

**Note:** For physicians, please provide a list of hospitals where the physicians have admitting privileges.

- D. Provide a copy of the most recent inspection reports and/or certificate for your facility:

- |   |   |
|---|---|
| <input type="checkbox"/> DPH                  | <input type="checkbox"/> JCAHO  |
| <input type="checkbox"/> Fire Marshall Report | <input type="checkbox"/> Other States Health Dept. Reports (new out-of-state providers) |
| <input type="checkbox"/> AAAHC                | <input type="checkbox"/> AAAASF   |
| <input type="checkbox"/> Other: _____         |   |

**Note:** Above referenced acronyms are defined below.<sup>1</sup>

E. Provide a copy of the following (as applicable):

- ☐ A copy of the related Quality Assurance plan ("QAP") and the latest version of the Annual Evaluation Report for the QAP.

## 6. Improvements to Productivity and Containment of Costs

In the past year has your facility undertaken any of the following activities to improve productivity and contain costs?

- ☐ Energy conservation      ☐ Group purchasing  
☐ Reengineering      ☐ None of the above  
☐ Application of technology (e.g., computer systems, robotics, telecommunication systems, etc.)  
☐ Other (identify) \_\_\_\_\_

## 7. Miscellaneous

A. Will this proposal result in new (or a change to) your teaching or research responsibilities?

- ☐ Yes      ☐ No

If you checked "Yes," please provide an explanation.

B. Are there any characteristics of your patient/physician mix that makes your proposal unique?

- ☐ Yes      ☐ No

If you checked "Yes," please provide an explanation.

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<sup>1</sup> DPH – Department of Public Health; JCAHO – Joint Commission on Accreditation of Hospitals Organization; AAAHC – Accreditation Association for Ambulatory Health Care, AAAASF – American Association for Accreditation of Ambulatory Surgery Facilities, Inc.

## 8. Financial Information

A. Type of ownership: (Please check off all that apply)

- ☐ Corporation (Inc.)      ☐ Limited Liability Company (LLC)  
☐ Partnership      ☐ Professional Corporation (PC)  
☐ Joint Venture      ☐ Other (Specify): \_\_\_\_\_

B. Provide the following financial information:

- i) Provide the total current assets balance as of the date of submission of this application.
- ii) Please submit the Applicant's audited financial statements for the most recently completed fiscal year. If the Applicant has no audited financial statements, please submit a compilation report or an unaudited Balance Sheet and Statement of Operations for the most recently completed fiscal year. These statements should be externally prepared and submitted on the preparer's letterhead.

## 9. Major Cost Components/Total Capital Expenditure

Submit a final version of all capital expenditures/costs as follows:

Medical Equipment (Purchase)	
Major Medical Equipment (Purchase)	
Non-Medical Equipment (Purchase)*	
Land/Building (Purchase)	
Construction/Renovation	
Other (Non-Construction) Specify: _____	
<b>Total Capital Expenditure</b>	
Medical Equipment (Lease (FMV))	
Major Medical Equipment (Lease (FMV))	
Non-Medical Equipment (Lease (FMV))*	
Fair Market Value of Space – (Capital Leases Only)	
<b>Total Capital Cost</b>	
Capitalized Financing Costs (Informational Purpose Only)	
<b>Total Capital Expenditure with Cap. Fin. Costs</b>	

\* Provide an itemized list of all non-medical equipment.

## 10. Construction Information

- A. Provide a detailed description of the proposed new construction/renovation including the related gross square feet of new construction/renovation.
- B. Provide all schematic drawings related to the project that are available, including existing and proposed floor plans.
- C. Explain how the proposed new construction or renovations will affect the delivery of patient care.
- D. Provide the following information regarding the schedule for new construction/ renovation:

Construction Commencement Date	
Construction Completion Date	
DPH Licensure Date	
Commencement of Operations Date	

## 11. Capital Equipment Lease/ Purchase

If the CON involves any capital equipment lease and/or purchase, please answer all of the following that apply:

What is the anticipated residual value at the end of the lease or loan term?	\$ _____
What is the useful life of the equipment?	_____ Years
Please submit a copy of the vendor quote or invoice as an attachment.	
Please submit a schedule of depreciation for the purchased equipment as an attachment.	

For multiple items, please attach a separate sheet for each item in the above format.

## 12. Type of Financing

A. Check type of funding or financing source and identify the following anticipated requirements and terms: (Check all which apply)

☐ Applicant's equity:

Source and amount:

Operating Funds	\$ _____
Source/Entity Name	_____
Available Funds	_____
Contributions	\$ _____
Funded depreciation	\$ _____
Other	\$ _____

☐ Grant:

Amount of grant	\$ _____
Funding institution/ entity	_____

☐ Conventional loan or  
Connecticut Health and Educational Facilities Authority (CHEFA)  
financing:

Current CHEFA debt	\$ _____
CON Proposed debt financing	\$ _____
Interest rate	_____ %
Monthly payment	\$ _____
Term	_____ Years
Debt service reserve fund	\$ _____

☐ Lease financing or  
CHEFA Easy Lease Financing:

Current CHEFA Leases	\$ _____
CON Proposed lease financing	\$ _____
Fair market value of leased assets at lease inception	\$ _____
Interest rate	_____ %
Monthly payment	\$ _____
Term	_____ Years

☐ Other financing alternatives:

Amount	\$ _____
Source (e.g., donated assets, etc.)	_____

B. Please provide copies of the following, if applicable:

- i. Letter of interest from the lending institution,
- ii. Amortization schedule (if not level amortization payments),
- iii. Lease agreement.

**13. Revenue, Expense and Volume Projections**

A.1. Payer Mix Projection

Please provide both the current payer mix and the projected payer mix with the CON proposal for the Total Facility based on Net Patient Revenue in the following reporting format:

Total Facility Description	Current Payer Mix	Year 1 Projected Payer Mix	Year 2 Projected Payer Mix	Year 3 Projected Payer Mix
Medicare*	%	%	%	%
Medicaid* (includes other medical assistance)				
CHAMPUS and TriCare				
<b>Total Government Payers</b>				
Commercial Insurers*				
Uninsured				
Workers Compensation				
<b>Total Non-Government Payers</b>				
<b>Payer Mix</b>	100.0%	100.0%	100.0%	100.0%

\*Includes managed care activity.

A.2. Please describe the impact of the proposal on the interests of consumers of health care services and the payers of such services.

B. Does the Applicant(s) have Tax Exempt Status? ☐ Yes ☐ No

C. Provide the following for the financial and statistical projections:

- i) A summary of revenue, expense and volume statistics, without the CON project, incremental to the CON project, and with the CON project. **See attached.** Please note that the actual results for the fiscal year reported in the first column must agree with the Applicant's audited financial statements.
- ii) Please complete CON Financial Attachment II
- iii) The assumptions utilized in developing the projections (e.g., FTE's by position, volume statistics, other expenses, revenue and expense % increases, project commencement of operation date, etc.).
- iv) An explanation for any projected incremental losses from operations contained in the financial projections that result from the implementation and operation of the CON proposal.
- vi) Provide a copy of the rate schedule for the proposed service.
- vi) Describe how this proposal is cost effective.



## GENERAL AFFIDAVIT

Applicant: \_\_\_\_\_

Project Title: \_\_\_\_\_

I, \_\_\_\_\_, \_\_\_\_\_  
(Name) (Position – CEO or CFO)

of \_\_\_\_\_ being duly sworn, depose and state that the (Facility Name) said facility complies with the appropriate and applicable criteria as set forth in the Sections 19a-630, 19a-637, 19a-638, 19a-639, 19a-486 and/or 4-181 of the Connecticut General Statutes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Subscribed and sworn to before me on \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Commissioner of Superior Court

My commission expires: \_\_\_\_\_

13.C(ii). Please provide <b>three</b> years of projections of <u>incremental</u> revenue, expense and volume statistics <b>attributable to the proposal</b> in the following reporting format:										
Type of Service Description										
Type of Unit Description:										
# of Months in Operation										
FY	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
FY Projected Incremental										
Total Incremental Expenses:				Gross Revenue Col. 2 * Col. 3	Allowances/ Deductions	Charity Care	Bad Debt	Net Revenue Col.4 - Col.5 -Col.6 - Col.7	Operating Expenses Col. 1 Total * Col. 4 / Col. 4 Total	Gain/(Loss) from Operations Col. 8 - Col. 9
Total Facility by Payer Category:										
Medicare				\$0				\$0	\$0	\$0
Medicaid		\$0		\$0				\$0	\$0	\$0
CHAMPUS/TriCare		\$0		\$0				\$0	\$0	\$0
Total Governmental			0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Commercial Insurers		\$0	5	\$0				\$0	\$0	\$0
Uninsured		\$0	2	\$0				\$0	\$0	\$0
Total NonGovernment		\$0	7	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total All Payers		\$0	7	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**12. C i.** Please provide one year of actual results and three years of projections of **Total Facility** revenue, expense and volume statistics without, incremental to and with the CON proposal in the following reporting format:

<u>Total Facility:</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>	<u>FY</u>
<u>Description</u>	<u>Actual</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>	<u>Projected</u>
	<u>Results</u>	<u>W/out CON</u>	<u>Incremental</u>	<u>With CON</u>	<u>W/out CON</u>	<u>Incremental</u>	<u>With CON</u>	<u>Incremental</u>	<u>With CON</u>
<b>NET PATIENT REVENUE</b>									
Non-Government									
Medicare					\$0		\$0		\$0
Medicaid and Other Medical Assistance					\$0		\$0		\$0
Other Government					\$0		\$0		\$0
Total Net Patient Revenue	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Operating Revenue									
Revenue from Operations	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>OPERATING EXPENSES</b>									
Salaries and Fringe Benefits					\$0		\$0		\$0
Professional / Contracted Services					\$0		\$0		\$0
Supplies and Drugs					\$0		\$0		\$0
Bad Debts					\$0		\$0		\$0
Other Operating Expense					\$0		\$0		\$0
Subtotal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Depreciation/Amortization					\$0		\$0		\$0
Interest Expense					\$0		\$0		\$0
Lease Expense					\$0		\$0		\$0
Total Operating Expenses	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Income (Loss) from Operations	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Non-Operating Income									
Income before provision for income taxes	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Provision for income taxes									
Net Income	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Retained earnings, beginning of year					\$0		\$0		\$0
Retained earnings, end of year	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FTEs					0		0		0

\*Volume Statistics:

Provide projected inpatient and/or outpatient statistics for any new services and provide actual and projected inpatient and/or outpatient statistics for any existing services which will change due to the proposal.