

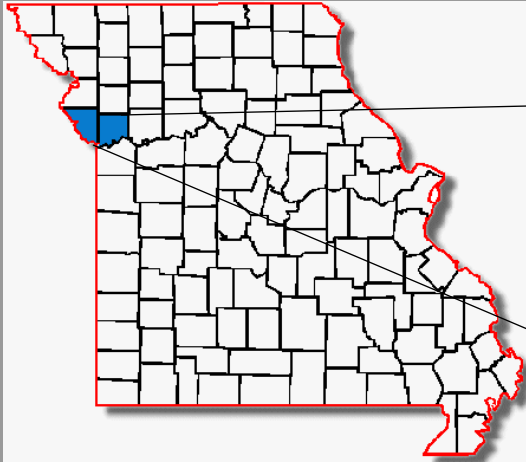
Missouri Health Facilities Review Committee
Certificate of Need Expedited Ballot Meeting
December 27, 2024

Tentative Agenda

1. #6167 HT: North Kansas City Hospital
North Kansas City (Clay County)
\$4,162,491, Replace linear accelerator
2. #6166 HT: St. Luke's RAYUS Radiology – Winghaven
O'Fallon (St. Charles County)
\$2,600,000, Replace MRI
3. #6168 HT: SSM Health St. Joseph Lake Saint Louis
Lake St. Louis (St. Charles County)
\$3,407,227, Replace MRI
4. #6169 HT: Northeast Regional Medical Center
Kirksville (Adair County)
\$1,911,737, Replace MRI

#6167 HT: North Kansas City Hospital

Replace Linear Accelerator



Location in Missouri



View of Service Area

Applicant: Board of Trustees of North Kansas City Hospital (owner)
North Kansas City Hospital (operator)

Contact Person: Jennifer Kozinn, 816-691-2038
Jennifer.kozinn@nkch.org

Project Address: 2750 Clay Edwards Drive
North Kansas City, 64116 (Clay County)

Cost: \$4,162,491

Appl. Rec'd: November 15, 2024
100 Days Ends: February 23, 2025 (30-Day Extension: March 25, 2025)

Conclusions: *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) Documented
- Detailed Description..... 19 CSR 60-50.430(4) Documented
- Community Need 19 CSR 60-50.440(3) Documented

#6167 HT: North Kansas City Hospital

APPLICATION SUMMARY:

*The application summary was **complete**.*

PROPOSAL DESCRIPTION:

*The detailed project description was **complete**.*

The applicant proposes to **replace a linear accelerator**. A Certificate of Need (4902 HT) was issued in May of 2013 for the current unit. The existing unit is a Varian Trilogy System. The replacement equipment would be a Varian TrueBeam linear accelerator system. The applicant expects purchase of the new system to occur in December of 2024, installation of the new unit during January of 2026, and be operational by third quarter of 2026. Renovations of the suite will occur during first quarter of 2026. The existing unit will be decommissioned upon installation.

COMMUNITY NEED CRITERIA AND STANDARDS:

*Compliance with the Criteria and Standards for “equipment” was **documented**.*

The existing system is eleven years old and is currently at end of life. A letter from the manufacturer, Varian, was issued to the applicant stating their particular linear accelerator will no longer be supported after May 1, 2025. With the existing system aging, replacement parts are difficult or unavailable to locate.

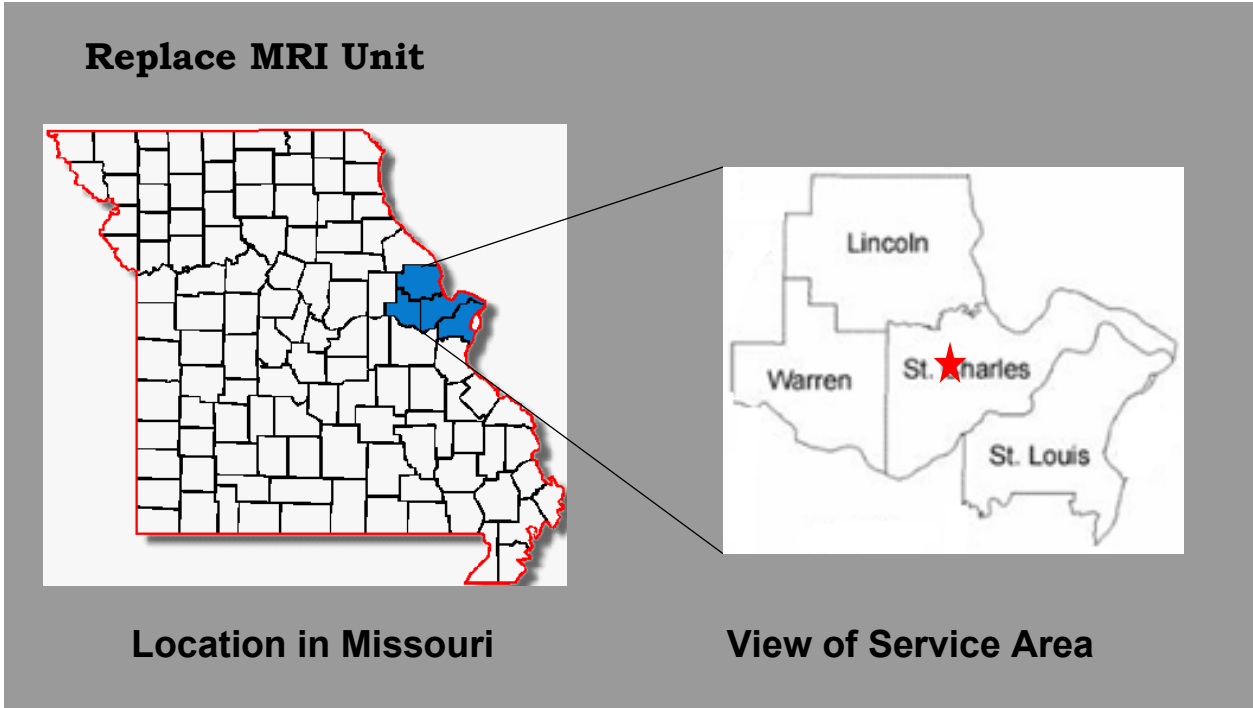
The TrueBeam system has new technical innovations to offer shorter treatment times, more precise and efficient treatment, treatment of multiple cancer sites at a time, and supports both intensity-modulated radiation therapy (IMRT) and stereotactic body radiation therapy (SBRT). The system enables less margins in radiation meaning the radiation treatment is more focused and radiation doses can be lower. This precision helps minimize damage to healthy tissues surrounding tumors.

The applicant expects utilization to increase with the replacement system and states there would be no direct increase in patient charges.

ADDITIONAL INFORMATION:

No additional information was required from the applicant at this time.

#6166 HT: St. Luke's RAYUS Radiology - Winghaven



Applicant: St. Luke's Center for Diagnostic Imaging, LLC dba St. Luke's RAYUS Radiology (owner/operator)

Contact Person: Richard Hill, 314-621-2939
rhill@lashlybaer.com

Project Address: 5551 Winghaven Boulevard, Suite 60
O'Fallon, 63368 (St. Charles County)

Cost: \$2,600,000

Appl. Rec'd: November 15, 2024
100 Days Ends: February 23, 2025 (30-Day Extension: March 25, 2025)

Conclusions: *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) Documented
- Detailed Description..... 19 CSR 60-50.430(4) Documented
- Community Need 19 CSR 60-50.440(3) Documented

#6166 HT: St. Luke's RAYUS Radiology - Winghaven

APPLICATION SUMMARY:

*The application summary was **complete**.*

PROPOSAL DESCRIPTION:

*The detailed project description was **complete**.*

The applicant proposes to **replace an existing magnetic resonance imaging (MRI) unit** that was previously purchased under the threshold. The existing unit is a GE GoldSeal Signa HDxt 1.5T MRI unit that was installed in 2013. The replacement equipment would be a Siemens Magnetom Altea 1.5T MRI. The applicant expects installation of the new unit during September of 2025. The existing unit will be traded-in upon installation.

COMMUNITY NEED CRITERIA AND STANDARDS:

*Compliance with the Criteria and Standards for "equipment" was **documented**.*

The current unit is eleven years old, and many functions have exceeded their useful life. A letter from the manufacturer, GE Healthcare, was sent to the applicant explaining the unit had reached its end of life as of June 30, 2024. Additionally, the existing unit has image quality concerns, forcing scans to be rescheduled and the shielding requires major repair, preventing the applicant from performing abdominal and pelvic scans.

The replacement unit is significantly more advanced than the current unit and offers a variety of new programs including Deep Resolve to help denoise the unit, TurboSuite to decrease image acquisition time and breath holds, myExam which increases image quality, and Tim 4G/BioMatrix technology to reduce motion detection. Additionally, the replacement equipment will offer bore and table improvements to accommodate all patients.

The applicant does expect utilization to increase with the replacement unit and states there would be no direct increase in patient charges.

FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

*Financial feasibility of the project was **documented**.*

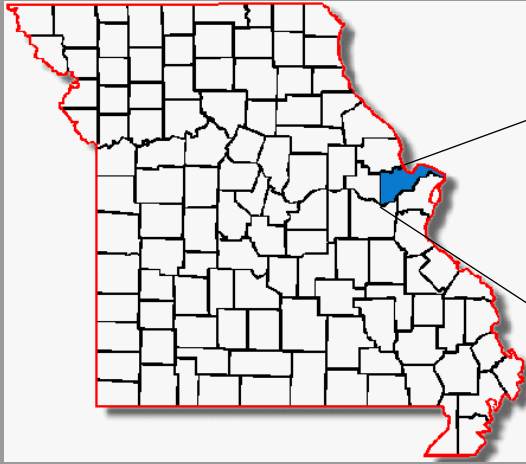
The project would be financed with a loan. The applicant provided a letter from Bank of America, stating they are willing to finance the project through a five year loan.

ADDITIONAL INFORMATION:

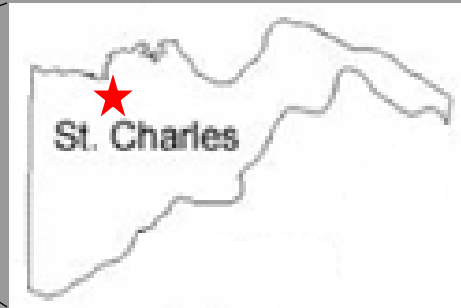
Additional information was required from the applicant and is posted on the CON website with the electronic application.

#6168 HT: SSM Health St. Joseph Lake Saint Louis

Replace MRI Unit



Location in Missouri



View of Service Area

Applicant: SSM Health St, Joseph Hospital Lake St. Louis
(owner/operator)

Contact Person: Mitch Miller, 314-989-6329
Mitchell.miller@ssmhealth.com

Project Address: 100 Medical Plaza
Lake St. Louis, 63367 (St. Charles County)

Cost: \$3,407,227

Appl. Rec'd: November 15, 2024

100 Days Ends: February 23, 2025 (30-Day Extension: March 25, 2025)

Conclusions: *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) Documented
- Detailed Description..... 19 CSR 60-50.430(4) Documented
- Community Need 19 CSR 60-50.440(3) Documented

#6168 HT: SSM Health St. Joseph Lake Saint Louis

APPLICATION SUMMARY:

*The application summary was **complete**.*

PROPOSAL DESCRIPTION:

*The detailed project description was **complete**.*

The applicant proposes to **replace an existing magnetic resonance imaging (MRI) unit** that was previously purchased under the threshold. The existing unit is a GE Signa HDe 1.5T 8 Channel MRI unit that was installed in 2007. The replacement equipment would be a Siemens Magnetom Sola 1.5T MRI. The applicant expects installation of the new unit during January 2025. The existing unit will be traded-in upon installation.

COMMUNITY NEED CRITERIA AND STANDARDS:

*Compliance with the Criteria and Standards for “equipment” was **documented**.*

The current unit is seventeen years old and has exceeded its useful life. Additionally, the existing unit has had over 300 hours of downtime in 2024 alone.

The replacement unit is significantly more advanced than the current unit and offers the ability to perform cardiac MRI's, which is currently not available in the area. Additionally, the replacement unit has the ability to scan a variety of implants, reduces scan times, reduces image motion, and allows for more definitive diagnosis.

The applicant does expect utilization to increase with the replacement unit and states there would be no direct increase in patient charges.

FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

*Financial feasibility of the project was **documented**.*

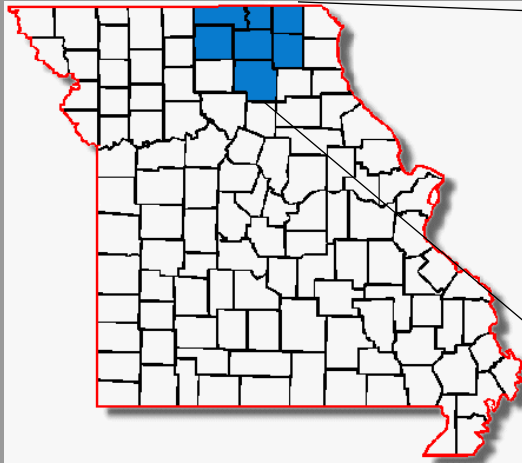
The project would be financed with unrestricted funds. The applicant provided consolidated financial statements documenting sufficient funds are available.

ADDITIONAL INFORMATION:

Additional information was required from the applicant and is posted on the CON website with the electronic application.

#6169 HT: Northeast Regional Medical Center

Replace MRI Unit



Location in Missouri



View of Service Area

Applicant: Kirksville Missouri Hospital Company, LLC (owner)
Northeast Regional Medical Center (operator)

Contact Person: Emily Solum, 573-761-1120
Emily.solum@huschblackwell.com

Project Address: 315 S Osteopathy Ave
Kirksville, 63501 (Adair County)

Cost: \$1,911,737

Appl. Rec'd: November 15, 2024

100 Days Ends: February 23, 2025 (30-Day Extension: March 25, 2025)

Conclusions: *Based on the following Certificate of Need Rules:*

- Application Summary..... 19 CSR 60-50.430(3) Documented
- Detailed Description..... 19 CSR 60-50.430(4) Documented
- Community Need 19 CSR 60-50.440(3) Documented

#6169 HT: Northeast Regional Medical Center

APPLICATION SUMMARY:

*The application summary was **complete**.*

PROPOSAL DESCRIPTION:

*The detailed project description was **complete**.*

The applicant proposes to **replace an existing magnetic resonance imaging (MRI) unit**. A Certificate of Need (4096 HS) was issued in October 2007 for the current unit. The existing unit is a Phillips 1.5T Achieva MRI unit. The replacement equipment would be a Phillips Ingenia Ambition 1.5T S MRI unit. The applicant expects delivery and installation of the new unit during February of 2025. The existing unit will be traded-in upon installation.

COMMUNITY NEED CRITERIA AND STANDARDS:

*Compliance with the Criteria and Standards for "equipment" was **documented**.*

The current unit is more than thirteen years old and is at end of life. Additionally, the unit has required more repairs in recent years.

The improved model would allow for greater patient comfort and usage by offering a larger bore to accommodate all patients, providing more detailed scans, utilizing updated coils to allow additional anatomy scans, producing more accurate scans to patients, and will include the latest and up-to-date software. Additionally, the unit would also be compatible with more implantation devices.

The applicant expects utilization to increase with the replacement equipment and states there would be no direct increase in patient charges.

ADDITIONAL INFORMATION:

Additional information was required from the applicant and is posted on the CON website with the electronic application.