

144 State Street Montpelier, VT 05633-3601 802-828-2177 Owen Foster, Chair Jessica Holmes, Ph.D. Robin Lunge, J.D., MHCDS David Murman, M.D. Thom Walsh, Ph.D., MS, MSPT Susan J. Barrett, J.D., Executive Director

## **DELIVERED ELECTRONICALLY**

September 22, 2023

Ms. Judi Fox, CEO and CFO Rutland Regional Medical Center 160 Allen St. Rutland, VT

RE: Docket No. GMCB-016-23con, Rutland Regional Medical Center, Purchase of an Additional CT Scanner

Dear Ms. Fox:

Thank you for your letter received on September 21, 2023, requesting a jurisdictional determination regarding the above-referenced project.

Your letter represents that Rutland Regional Medical Center (RRMC) proposes to purchase a second CT scanner which will be housed in a room with lead-lined walls adjacent to the space that houses the existing CT scanner, which will continue in use. The scanner RRMC proposes to purchase is a GE Revolution Ascend 75cm wide-bore CT system. You also state that although RRMC has a Nuclear Medicine machine with a CT component, it is not adequate to address RRMC's needs due to being extremely slow and often unavailable due to core Nuclear Medicine utilization.

RRMC represents that its existing CT scanner operates 24 hours a day, 365 days a year. The number of tests performed with this single scanner has steadily risen since 2018 and now exceeds capacity. The current wait time for an outpatient CT scan at RRMC is six weeks. The six-week wait time has caused RRMC to frequently refer patients out of its service area causing potentially dangerous delays and increased cost and inconvenience for its patients.

RRMC represents that numerous service lines rely on CT imaging to provide evidence-based patient care per industry best practice protocols and standards. Consistent and reliable CT scanner access is needed for the effective management of hospital and clinic patients and RRMC's non-hospital primary care partners who also depend on CT service to manage the needs of their patients and to prevent avoidable visits to the Emergency Department. RRMC is experiencing increased CT scanner demand for diagnostic CT testing. Its radiologists have been performing higher numbers of CT-guided bone and lung biopsies and interventional procedures, which can take the CT offline for an hour at a time. With an aging population, RRMC is seeing



among its patients a higher incidence of cancer requiring radiation therapy. Every course of radiation therapy begins with a planning simulation using CT technology. Cardiologists are also requesting increased CT use to implement coronary calcium scoring methodology that more accurately predicts cardiovascular risks. The proposed new GE Revolution Ascend 75cm widebore CT system also accommodates patients of size and provides state-of-the-art stroke care.

In preparation for this request, RRMC obtained data from Sg2, a national consultant group, predicting double-digit growth in outpatient CT imaging over the next ten years. Without a second CT scanner, RRMC represents that it will not be able to catch up with the current demand it is experiencing nor prepare to meet increased future demand. RRMC states that with the existing CT scanner being taken offline for hours at a time to accommodate vital procedures, combined with an overall increase in urgent and emergent protocols requiring CT and routine and regular maintenance, having only one CT machine is negatively affecting RRMC's ability to effectively manage current volumes and meet projected increases in future demand. RRMC maintains that having a second CT will allow them to meet patient needs for CT testing so that patients from RRMC's service area do not have to travel further for CT testing.

You state that the project will require a capital cost of \$1,354,359 and an increase in annual operating expenses of \$260,472 in year 1; \$445,811 in year 2; and \$445,811 in year 3 of operation. Based on the representations contained in the documents you have submitted, the capital and annual operating expenses are below the thresholds that trigger Certificate of Need (CON) review, and therefore, the project is not subject to review at this time.

As you proceed with developing and implementing this project, if there are any changes in type, scope, or cost of the project (including, but not limited to, changes in capital and/or annual operating expenses), please contact the Board immediately so we may determine whether any further process is necessary. Failure to do so as required by Green Mountain Care Board Rule 4.301(4) may result in sanctions, as specified in 8 V.S.A. § 9445.

If you have further questions, please do not hesitate to contact me at 802-760-8162. Sincerely,

## s/ Donna Jerry

Donna Jerry, Senior Health Policy Analyst Green Mountain Care Board

cc: Laura Beliveau, Staff Attorney, GMCB

