

# North Carolina Department of Health and Human Services Division of Health Service Regulation

Pat McCrory Governor Richard O. Brajer Secretary DHHS

Mark Payne Assistant Secretary for Audit and Health Service Regulation

March 11, 2016

Sean A. Timmons 421Fayetteville Street, Suite 1100 Raleigh, NC 27610-3000

Exempt from Review - Replacement Equipment

Record #:

1889

Facility Name:

DLP Cardiac Partners, LLC

FID#:

160094

Business Name:

DLP Cardiac Partners, LLC

Business #:

2314

Project Description:

The mobile cardiac catheterization equipment formerly located at Novant Health Matthews Medical Center will be relocated to Mariah Parham Medical Center where it will operate as fixed cardiac catheterization

equipment

County:

Vance

Dear Mr. Timmons:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of February 22, 2016, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(7). Therefore, you may proceed to acquire, without a certificate of need, the GE Innova 3100 fixed cardiac catheterization equipment. This determination is based on your representations that the unit will be removed from North Carolina and will not be used again in the State without first obtaining a certificate of need.

Moreover, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections, to determine if they have any requirements for development of the proposed project.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a



Healthcare Planning and Certificate of Need Section

Sean A. Timmons March 11, 2016 Page 2

separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Bernetta Thorne-Williams

Project Analyst

Martha J. Frisone,

Assistant Chief, Certificate of Need

cc: Construction Section, DHSR

Kelli Fisk, Program Assistant, Healthcare Planning, DHSR

Acute and Home Care Licensure and Certification Section, DHSR

421 Fayetteville Street, Suite 1100, Raleigh, NC 27601-3000 • 919.832.1744

February 22, 2016

Via Hand Delivery

Sean A. Timmons (919) 832-1721 (919) 747-4231 Direct Fax stimmons@polsinelli.com

Martha J. Frisone, Assistant Chief North Carolina Department of Health and Human Services, Healthcare Planning and Certificate of Need Section 809 Ruggles Drive Raleigh, North Carolina 27603

Re:

No Review Request for DLP Cardiac Partners – Vance County – Relocate Cardiac Catheterization Equipment – Update No Review Request Record # 1794

Dear Ms. Frisone:

We write on behalf of our client DLP Cardiac Partners, LLC ("DLPCP") to update the Healthcare Planning and Certificate of Need Section (the "Section") on proposed changes to the project (the "Project") described in the No Review Letter from the Section dated November 19, 2015, No Review Record # 1794 (copy enclosed for reference) and to request written confirmation that the Certificate of Need law does not apply to the Project as changed, and that no Certificate of Need is required for the Project as changed.

# **Factual Background**

As described in the No Review Request letter dated November 10, 2015 from Matthew A. Fisher, Esq. on behalf of DLPCP to the Section (copy enclosed for reference), the Project originally involved removing cardiac catheterization equipment (GE Innova 3100, serial number 402411BU3) (the "Equipment") from service at Novant Health Presbyterian Matthews Medical Center and placing it on a mobile trailer with a route primarily focused at Mariah Parham Medical Center, 566 Ruin Creek Road, Henderson, North Carolina 27536 ("MPMC"), with other sites to be developed.

The proposed change to the Project is that the Equipment will now be relocated to MPMC as a fixed location, and will become operational at that location on May 2, 2016. Therefore, the Equipment will not be placed on a mobile trailer, as indicated in the November 10, 2015 No Review Request, and no other sites will be developed. However, the Equipment will



Martha J. Frisone, Assistant Chief February 22, 2016 Page 2

still be operated under a service agreement with MPMC, and ownership of the Equipment will not be transferred to MPMC or any other facility.

Furthermore, the relocation of the Equipment will not entail costs in excess of \$750,000, nor will it result in the acquisition of "Major Medical Equipment" or in the development of a "New Institutional Health Service" as defined by N.C. Gen. Stat. § 131E-176.

As you will recall, the Equipment is one of nine grandfathered cardiac catheterization units operated by DLPCP, pursuant to a 14 August 1995 Settlement Agreement between the Department of Health and Human Services and DLPCP's predecessor-in-interest, MedCath Partners, LLC.

# **Analysis**

Because the Equipment is grandfathered equipment as described above, and the relocation will not cost in excess of \$750,000, will not result in the acquisition of Major Medical Equipment and will not result in the development of a New Institutional Health Service, the Project as modified in this letter does not require a Certificate of Need.

We would appreciate your confirming in writing that no Certificate of Need review is necessary for the Project as modified as soon as possible. Please feel free to contact me if you have any questions or need additional information.

Please file-stamp the enclosed additional copy of this request letter and return it to our courier, who has been instructed to wait.

Very truly yours,

Sean A. Timmons

Enclosures



# North Carolina Department of Health and Human Services Division of Health Service Regulation

Pat McCrory Governor Richard O. Brajer Secretary DHHS

Drexdal Pratt Division Director

November 19, 2015

Matthew A. Fisher Poyner Spruill 301 Fayetteville Street Suite 1900 Raleigh, NC 27601

No Review

Record #:

1794

Facility Name:

DLP Cardiac Partners, LLC

Business Name:

DLP Cardiac Partners, LLC

Business #:

2314

Project Description:

Remove the cardiac catheterization unit from Novant Health Matthews Medical Center, install in a trailer and locate it at Maria Parham Medical

Center and other locations yet to be determined

County:

Vance

Dear Mr. Fisher:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of November 10, 2015 regarding the above referenced proposal. Based on the CON law in effect on the date of this response to your request, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that if the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

However, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections to determine if they have any requirements for development of the proposed project.

It should be noted that this determination is binding only for the facts represented in your correspondence. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is



# Healthcare Planning and Certificate of Need Section

www.ncdhhs.gov
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Mailing Address: 2704 Mail Service Center •Raleigh, NC 27699-2704
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7

Matthew A. Fisher November 19, 2015 Page 2

required would need to be made by this office. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,

Bernetta Thorne-Williams

Project Analyst

Martha J. Frisone

Assistant Chief, Certificate of Need

cc:

Acute and Home Care Licensure and Certification Section, DHSR

Construction Section, DHSR

Kelli Fisk, Program Assistant, Healthcare Planning

# Poyner Spruill "

10 November 2015

VIA HAND DELIVERY

Martha J. Frisone
Assistant Chief
North Carolina Department of Health and Human Services,
Division of Health Service Regulation, Certificate of
Need and Health Planning Section
809 Ruggles Drive
Raleigh, North Carolina 27603

Matthew A. Fisher
Partner
D: 919.783.2924
F: 919.783.1075
mfisher@poynerspruill.com

RE: No Review Request for DLP Cardiac Partners, LLC: Relocate Cardiac Catheterization Equipment

Dear Ms. Frisone:

On behalf DLP Cardiac Partners, LLC. ("DLPCP"), I am writing to request written confirmation that the CON Law does not apply to and that no CON is required for the following project (the "Project").

#### Factual Background

Pursuant to a service agreement, DLPCP has provided cardiac catheterization services at Novant Health Presbyterian Matthews Medical Center ("NHPMMC") in Matthews, Mecklenburg County, North Carolina. The most recent iteration of this service agreement is attached hereto as <a href="EXHIBIT A">EXHIBIT A</a>. NHPMMC, has notified DLPCP of its intent to terminate the service agreement effective 7 December 2015, and has requested that DLPCP remove the cardiac catheterization equipment currently on site at NHPMMC by 12 November 2015.

The equipment at issue consists of a GE Innova 3100, bearing serial number 402411BU3 (the "Existing Equipment") which was acquired in 2009 by DLPCP's predecessor in interest, MedCath Partners, LLC ("MedCath")<sup>1</sup>, as a replacement for prior equipment purchased on 7 June 2010. The 24 November 2009 replacement equipment exemption request for the purchase of the GE Innova unit is attached hereto as <a href="EXHIBIT B">EXHIBIT B</a>. Information regarding the specifications of the Existing Equipment is attached hereto as <a href="EXHIBIT C">EXHIBIT C</a>. The original Bill of Sale for the prior equipment is attached hereto as <a href="EXHIBIT D">EXHIBIT D</a>. The Existing Equipment at issue is one of nine grandfathered cardiac catheterization units operated by DLPCP, pursuant to a 14 August 1995 Settlement Agreement between the Department and DLPCP's predecessor in interest, MedCath.

#### Proposed Relocation

As a result of the termination of the service agreement by NHPMMC, DLPCP intends to relocate the Existing Equipment to a mobile trailer allowing it to be transported easily. The mobile route will be primarily focused at Mariah Parham Medical Center, located at 566 Ruin Creek Rd., Henderson, North Carolina 27536, with other sites to be developed, as is set forth in EXHIBIT E.

MedCath was acquired by DLPCP pursuant to an CON exempt acquisition in 2011.

WWW POYNERSPRUIEF LEDKE

RALEIGH

Martha J. Frisone 10 November 2015 Page 2

Ownership of the Existing Equipment will not be transferred to Mariah Parham Medical Center or other facilities served thereby, but rather, the Existing Equipment will be operated pursuant to a service agreement.

The relocation of the Existing Equipment will not entail costs in excess of \$750,000 and will not result in the acquisition of "Major Medical Equipment" or in the development of a "New Institutional Health Service" as defined by N.C. Gen. Stat. § 131E-176.

While this project does not propose the replacement of the Existing Equipment, to the extent that they are helpful you will also find attached as <a href="Exhibit F">EXHIBIT F</a> the Checklist for Acquisition of Replacement Equipment, and an Equipment Comparison Form, attached as <a href="Exhibit G">EXHIBIT G</a>.

Accordingly, DLPCP respectfully requests that the CON Section determine that the Project described in this letter does not require CON review.

Partner –

Thank you for your consideration.

With warm regards, I remain,

Very truly yours,

Matthew A. Fisher

MAF:mf

cc: Todd Williamson

**Enclosures** 

# SIGNED WRITTEN PRE-APPROVED AGREEMENT FACILITY REQUEST TO ENTER INTO MEDITRACT CONTRACT MANAGEMENT DATABASE

#### **CEO CERTIFICATE - SERVICES**

#### Regarding the Agreement:

Third Amendment to Service Agreement between DLP Cardiac Partners, LLC ("Facility") and Presbyterian Medical Care Corp DBA Novant Health Matthews Medical Center ("Contractor"), dated 23 March, 2015 (the "Agreement"). The "Services" refers to all services to be provided pursuant to the Agreement.

#### Certification:

As the Facility's Chief Executive Officer, I am requesting that this pre-approved written agreement, signed by all parties, be entered into the MediTract contract management database.

#### I certify and acknowledge:

- 1. There are no agreements or understandings, verbal or written, related to the Services, that condition the payment or the arrangement on the volume or value of any referrals or other business generated between the parties;
- 2. Since receiving the pre-approved written Agreement, no changes have been made to the Agreement.
- 3. Until the Agreement is listed in MediTract, I will not begin the services or make payments under this Agreement.
- 4. Once the Agreement begins, I will ensure that no payments are made and will not accept services beyond the terms of this Agreement, or the terms of other company approved agreements between the parties.

Chief Executive Officer

3/71/15

Date

The fully signed Agreement and CEO Certification will be listed in the MediTract contract management database upon receipt and verification that no changes have been made to this Agreement.



#### THIRD AMENDMENT TO THE SERVICE AGREEMENT

THIS THIRD AMENDMENT TO THE SERVICE AGREEMENT (this "Third Amendment") is entered into effective the 220 day of March, 2015, (the Third Amendment Effective Date") by and between DLP Cardiac Partners, LLC ("DLPCP") and Presbyterian Medical Care Corp, doing business as Novant Health Matthews Medical Center ("Hospital") (each a "Party" and together the "Partles") with reference to the following facts:

WHEREAS, the Parties executed a Service Agreement effective June 8, 2010 as amended June 8, 2012 and December 5, 2014 (the "Service Agreement");

WHEREAS, the Parties wish to amend the Service Agreement as follows:

1. Section 4.1 of the Service Agreement shall be deleted in its entirety and replace with the following:

Term. This Agreement shall have an initial term (the "Initial Term") of five (5) years which shall commence upon June 8, 2010 (the "Commencement Date"). Provided that Hospital is not then in default of this Agreement, this Agreement shall automatically renew for one additional term beginning June 8, 2015 and ending on December 7, 2015 (the "Renewal Term").

2. Section 3.1 (a) of the Service Agreement shall be amended by adding the following as a second paragraph:

During the Renewal Term, Hospital shall pay to DLPCP a monthly payment for management and administrative support services and for the services of the Lab ("Monthly Management Payment") in the amount of \$30,760.48 due and payable on the first (1<sup>st</sup>) day of each month.

3. Section 3.1 (c) of the Service Agreement shall be amended by adding the following sentence at the end of the paragraph:

Pursuant to the terms of this subsection (c), no payment shall be due by Hospital during the Renewal Term.

Except as provided herein, all other terms and conditions of the Service Agreement shall remain in full force and effect.

In witness whereof, the Parties have executed this Agreement as of the Third Amendment Date.

Presbyterian Medical Care Corp.

Ricard + 27 Haran

us: Al Mi Leave L' MOLLIAM

Date: 3.23 \S

DLP CARDINE PARTNERS LLC

By Tore

to: execusive Duck

DAG: 4/3/15

# Moore & Van Allen

Carol E. Bowen Attorney at Law

T 704 331 2462 F 704 378 1962 carolbowen@mvalaw.com

Moore & Van Allen PLLC

100 North Tryon Street Charlotte, NC 28202-4003

#### VIA UPS

November 24, 2009

Lee B. Hoffman, Chief Department of Health and Human Services Division of Facility Services Certificate of Need Section 701 Barbour Drive Raleigh, North Carolina 27603

Prior Written Notice and Request for Exemption to Provide Replacement Equipment in Matthews, North Carolina

Dear Ms. Hoffman:

On behalf of MedCath Partners, LLC (formerly known as MedCath Diagnostics, LLC) ("MedCath"), I am writing to notify the Department that MedCath intends to replace its existing Siemens Artis cardiac catheterization lab serial #6570 with a GE Innova 3100 cardiac catheterization lab serial #557462BU9. As you know, upon receipt of prior written notice, the Department is required to exempt proposals for the provision of replacement equipment from certificate of need review pursuant to the terms of N.C. Gen. Stat. § 131E-184(a)(7).

On September 28, 2009, Todd Williamson, Executive Director, NE Operations, at MedCath notified the Department that MedCath intended to replace its existing GE Advantx LCV+ mobile cardiac catheterization equipment, serial # 82824VP4, with the Siemens Artis cardiac catheterization lab serial #6570. As stated above, MedCath now plans to replace the Siemens Artis cardiac catheterization lab serial #6570 to provide the services of the replacement equipment at Presbyterian Medical Care Corp., d/b/a Presbyterian Hospital Matthews ("PHM") in Matthews, North Carolina.

MedCath will acquire the GE Innova 3100 cardiac catheterization lab serial #557462BU9 for the sole purpose of replacing serial #6570, the unit of comparable medical equipment. MedCath is electing to replace this equipment because of the needs of the proposed Services Agreement between MedCath and PHM.1 The basic technology and functions of the existing and replacement equipment are the same. The diagnostic and treatment purposes and capabilities of the new equipment are the same as those for the equipment currently in use by MedCath.

MedCath represents to the Department that the existing unit of cardiac catheterization equipment will be sold or otherwise disposed of when replaced. MedCath expressly acknowledges that the existing equipment will be removed from the State of North Carolina and will not be used in North Carolina without first obtaining a new certificate of need. Until such time as the Service Agreement is entered into by MedCath and PHM and the replacement equipment is acquired by MedCath, the existing unit will continue to be used under MedCath's existing agreement to service the Eastern North Carolina route in

<sup>1</sup> As you know, MedCath sought guidance from the Department related to the proposed Service Agreement via my email correspondence to Angel Gray dated November 23, 2009.



Ms. Lee Hoffman, Chief November 24, 2009 Page 2

conjunction with the cardiac catheterization lab already designated to serve the Eastern North Carolina route.

As you are aware, the existing equipment consists of one of the nine units of cardiac catheterization equipment that MedCath is authorized to operate in North Carolina pursuant to the Settlement Agreement executed by the Department on August 14, 1995 ("the 1995 Settlement Agreement"). The replacement equipment is already located at PHM so there will no installation or other capital costs associated with its use. The cost of the replacement equipment will be less than two million dollars (\$2,000,000).

Enclosed is an Equipment Comparison form that provides, among other things, the model and serial number of the existing equipment. Also enclosed is the checklist for Acquisition of Replacement Equipment and related exhibits.

Very truly yours,

MOORE & VAN ALLEN, PLLC

and of bower

Carol E. Bowen

Enclosures

cc: Angel Gray

Mr. Blair Todt, Esq. (w/o enclosures)

# **Checklist for Acquisition of Replacement Equipment**

1. A comparison of the existing and replacement equipment, using the format in the attached table.

#### See table enclosed.

2. A description of the basic technology and functions of the existing and replacement equipment, including the diagnostic and treatment purpose for which the equipment is used or capable of being used.

#### See table enclosed.

3. Brochure or letters from the vendors describing the capabilities of the equipment.

#### See attached brochures.

4. A copy of the purchase agreement and lease for the existing equipment, including all components and original sales price.

# See attached payment invoice.

5. A copy of the title, if any, for the existing equipment or the capital lease for the existing equipment.

#### See attached Certificate of Title.

6. If replacement equipment is to be leased ...

# Not applicable.

7. If replacement equipment is to be purchased a copy of proposed purchase agreement, including the price of all component to be purchased.

#### See attached Bill of Sale.

8. A letter from the person taking possession of the existing equipment that acknowledges the existing equipment: will be permanently removed from North Carolina, will no longer be exempt from requirements of the North Carolina Certificate of Need Law, and will not be used in North Carolina without first obtaining a new Certificate of Need.

See cover letter. MedCath expressly acknowledges that the existing equipment will be removed from the State of North Carolina and will not be used in North Carolina without first obtaining a new certificate of need.

9. Documentation that the existing equipment is currently in use and has not been taken out of service.

See cover letter.

# **EQUIPMENT COMPARISON**

	EXISTING EQUIPMENT	REPLACEMENT EQUIPMENT
Type of Equipment (List Each Component)	cardiac cath lab	cardiac cath lab
Manufacturer of Equipment	Siemens	GE
Tesla Rating for MRIs	N/A	N/A
Model Number	Artis	Innova 3100
Serial Number	6570	557462BU9
Provider's Method of Identifying Equipment	N/A	N/A
Specify if Mobile or Fixed	Mobile	Fixed
Mobile Trailer Serial NumberVIN #	1LH142UH031012859	N/A
Mobile Tractor Serial Number/VIN#	N/A	N/A
Date of Acquisition of Each Component	5/13/2006	12/1/2009
Does Provider Hold Tittle to Equipment or Have a Capital Lease?	Hold Title	Hold Title
Specify if Equipment Was/Is New or Used When Acquired	New	Used
Total Capital Cost of Project (including Construction, etc.) *Use attached form*	N/A	N/A
Total Cost of Equipment	1,527,368	753,126
Fair Market Value of Equipment	1,527,368	753,126
Net Purchase Price of Equipment	1,527,368	753,126
Location Where Operated	FirstHealth of the Carolinas, Inc. in Pinehurst, NC; Betsy Johnson Regional Hospital in Dunn, NC; and Sampson Regional Medical Center in Clinton, NC	Presbyterian Hospital Matthews in Matthews, NC
Number days in Use/To be Used in NC Per Year	250	250
Percent Change in patient Charges (by Procedure)	Α'N	A/N
Percent of Change in Per Procedure Operating Expenses (by Procedure)	N/A	N/A
Type of Procedures Currently Performed on Existing equipment	cardiac catheterizations	N/A
Type of Procedures New Equipment is Capable of Performing	N/A	cardiac catheterizations

# Confidential Char1/1140584v1

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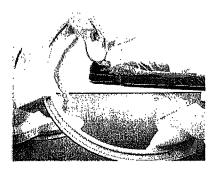
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#### **AXIOM Artis dFC**

This all-digital single-plane C-arm angiography system is designed to give you unprecedented cardiac imaging performance and an expansive range of diagnostic and interventional applications - from cardiac angiography to ECG-triggered fluoroscopy.

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- · Compact and slim-line C-arm design
- · Fast and flexible C-arm positioning around the patient
- · Excellent image quality through CLEAR technology
- · Easy and intuitive system control
- · World-class integration with the AXIOM Sensis XP recording system
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Intravascular Ultrasound Integration Intravascular Ultrasound can now be integrated with the AXIOM Artis flat-detector (FD) system

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It is crucial for every clinical enterprise to deliver high-quality yet costeffective healthcare. We have developed AXIOM Artis dFC with one goal in mind: ensuring that you meet these demands by simplifying work processes for faster workflow and establishing reliable system performance to let you deliver the highest quality of care.

#### The advantages you can experience

- · Higher system utilization and shorter throughput times
- · Increased competitiveness through delivery of state-of-the-art services from new clinical applications
- · Reduction of operating expenses
- · Reduction of investment costs

As a leader in healthcare solutions, we developed a range of services ranging from technical to financial. These services are offered with AXIOM Artis dFC and can be tailored to complement your Individual business model to provide a total solution:

- Managed Healthcare Services, ranging from process consulting to management of data processing functions
- Customized financing through our partner, Siemens Finance & Leasing
- Flexible and comprehensive service packages from <u>Liptime Services</u> to help your system achieve maximum uptime

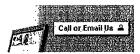
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#### AXIOM Artis dFC - Clinical Application

#### Meeting all clinical needs

Floor-mounted AXIOM Artis dFC allows a smooth and efficient workflow. Its flexible and ergonomic system architecture allows a configuration that is optimally adapted to interventional cardiology, pediatric, and electrophysiological applications.



AXIOM Artis dFC allows you to operate the entire system close to the patient, directly at the examination table with ergonomically designed control modules and an easy to use color touchscreen. In addition, you can optionally control the most important non-safety relevant functions by an innovative voice control.



#### Image quality

AXIOM Artis dFC combines the benefits of modern high tech to optimize your diagnostic confidence. State-of-the-art dynamic flat detector technology, a high-frequency X-ray generator, and automatic parameter settings deliver excellent spatial and contrast resolution. With CLEAR technology, Siemens sets a new standard in image acquisition and processing. An embedded algorithm significantly reduces noise at low dose fluoroscopy and still improves visibility of guidewires and stents. This results in excellent image quality with minimum radiation.

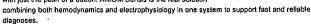


The integrated CARE package for intelligent radiation protection includes automatic copper pre-filtration, radiation-free positioning, pulsed fluoroscopy, and more - enabling a high level of dose reduction.



syngo-based AXIOM Artis oFC supports various DICOM services to enable optimal system integration with your HIS/RIS enterprise. One example is the DICOM Query/Retrieve function, which enables direct access to archived images for display in the examination room facilitating diagnoses during procedures.

In addition, AXIOM Sensis allows bi-directional communication between the Siemens X-ray device and the recording system. Images from AXIOM Artis dFC can be transmitted directly to AXIOM Sensis with just the push of a button. AXIOM Sensis is the real solution





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#### AXIOM Artis dFC - Patient Benefits

Siemens provides the Tempur-Pedic® mattress, which molds itself to any body shape. Pressure is evenly distributed to the entire body, eliminating pressure points that could cause pain during long

#### Take CARE with reduced radiation dose

AXIOM Artis oFC allows you to obtain optimal image quality at a significantly reduced radiation dose. The CARE package is available for this purpose and additionally enables the physician to fully concentrate on the patient during a smooth, low-dose examination. The package includes:

- · CAREVISION provides pulsed fluoroscopy during lengthy examinations for dose reduction
- CAREWATCH displays current dose values for radiation
- CAREFILTER -- for automatic copper pre-filtering
- · CAREPROFILE for the radiation-free positioning of all collimators and filters for dose reduction
- CAREMATIC automatic X-ray control system for fully automatic calculation and optimization of exposure data based on fluoroscopic values
- CAREPOSITION perform visually controlled object positioning without radiation

With the innovative, cutting-edge technology of AXIOM Artis dFC, patients can be ensured of less stressful examinations.

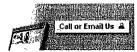
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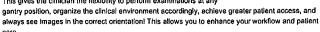
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#### AXIOM Artis dFC - Technical Specifications

#### System Design

The MULTISPACE.F option has an integrated gantry/table design to provide all working positions needed for interventional procedures. The gantry stand rotation allows free positioning of the C-arm and table relative to one another - as a result, almost any projection and angle are possible.

The detector and collimator rotation of AXIOM Artis dFC allows upright image display for acquisition and fluoroscopy, even when the system gantry is in any position, from the patient's left to the patient's right. This gives the clinician the flexibility to perform examinations at any





Our high-resolution detector provides excellent spatial resolution and higher contrast resolution compared to an image intensifier. This significantly improves image quality for interventional procedures. Flat detector 20 x 20

- · Dedicated cardiac detector (25 cm, 20 cm, and 17 cm diagonal input
- Outstanding spatial resolution (2.7 Lp/mm)
- High dynamic range (14-bit digitalization depth)
- · No vignetting

#### Flat detector 30 x 40

- · Excellent access and coverage (portrait and landscape viewing)
- · Outstanding spatial resolution (3.25 Lp/mm)
- Highest dynamic range (14-bit digitalization depth)
- No vignetting

#### Designed for innovative Applications

AXIOM Artis oFC uses syngo®, our intuitive user interface for a smooth system integration. Accordingly, the architecture of AXIOM Artis dFC is open for expansion:

- Voice control\*\* a convenient way of controlling your system via voice commands. Improve comfort and workflow for the staff via hands-free operation.
- Wireless footswitch\*\* eliminates extra cabling on the floor, which improves procedure flexibility and operator comfort.
- AXIOM Sensis\* our hemodynamic and EP system provides bidirectional communication such as patient registration and data transfer functionalities taking connectivity of your catheterization laboratory a step further.
- syngo IC3D\* a fast and accurate method for lesion analysis using a 3D morphological model of the coronary vessel.
- syngo InSpace EP\* automated "one-click" segmentation and 3D visualization of the left atrium for excellent AFib ablation planning.
- · Perivision\* programmed acquisition of real-time, subtracted images of the lower limbs acquired with a stepping mode. This mode is also user-interactive to allow for adaptation of imaging sequence to vascular flow. Note: large detector required.
- . Dynavision\* rotational angiography with real-time acquisition of subtracted images of vascular structures. These images can be further processed into 3D images on the syngo X Workplace. The maximum C-arm speed is 60°/sec, which will result in shorter bolus times and lower amount of contrast agent needed.
- · Pediatrics option with 60 f/s for small FD.
- \*\* Option Not available in all countries. Local radio frequency laws to be observed

#### Related Links

SYNGO®

Siemens' comprehensive software solution for all medical imaging tasks, applications and systems









#### **Product Details**

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Healthcare Products & Solutions Detection & Diagnosis

Angiography

AXIOM Artis oFC

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#### AXIOM Artis dFC - Upgrades & Services

We accompany you through the entire life cycle of your system, offering a broad spectrum of services, training, and upgrade options. Our Life customer support program revolves around your individual



Life is the unique customer care solution that helps you get the most from your investment. From the moment of your purchase, Life surrounds you with an array of programs and support that enables the continuous development of your skills, productivity and technology. Allowing you to broaden your capabilities. Increase profitability. And take patient care to the next level.

For the continuous development of your Skills

Educate - Application services and clinical training Educate is our application service and clinical training program that helps keep everyone on your

The continous development of your Productivity

- Customizable Service Agreements Our comprehensive portfolio of customized performance plans and variable shared service
- agreements for every type of service support.
- Managed Services

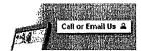
Flexible managing service solutions to assist you in optimizing the cost efficiency of your medical equipment and clinical networks.

Enhanced Productivity Services Optional service offerings designed to help you leverage the full value potential of your systems.

The continuous development of your Technology

- synuo Evolve<sup>TM</sup> Obsolescence protection program Helping you to stay on top of computer software and hardware upgrades and updates.
- Expand Broaden clinical capabilities Broaden clinical capabilities Ensuring your access to the latest, most promising clinical developments to seize new business
- Elevate Managed system upgrade program- Managed system upgrade program Whether you're at the end of a product's lifecycle, the end of a lease, or at the beginning of a new platform, Elevate can help you make the transition.

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#### Innova 3100

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Products and Solutions

X-ray

Cardiovascular

Innova 3100

Cardiovascular

Innova 2100<sup>IQ</sup>

Cardiac Mobile C-Arm

Innova 4100<sup>IQ</sup>

Innova 3100

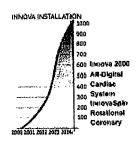
Inova IVUS





All-Digital Cardiovascular and Interventional Imaging
Customer Testimonial (PDF)

Innova. Pure Innovation. Proven performance.



How do you inject greater confidence into your practice? Operate with the world's most tried and trusted all-digital cardiovascular and interventional imaging systems.

The Innova® line of systems is built on GE's industry-leading Revolution™ detector technology for unmatched image quality, and the only demonstrated dose savings.

That's why you'll find Innova in more labs than all other systems combined. More than 1100 installations strong and counting, Innova helps more physicians clearly visualize fine

vessels. Precisely place more stents. Successfully perform more lifesaving procedures than any other digital cardiovascular imaging system.

With Innova, you conduct every study with a confidence proven in practice. And the reassurance that every detail is clearly in sight.

### Innova 3100



# Exceptional angio. Superb cardiac.

One remarkable system.

Only the Innova 3100 lets you perform exams from cardiac to anglo. On one system. In one room, With no compromises.

An ideal 31 centimeters square, it's perfectly designed for a wide range of cardiovascular and interventional imaging. With a field of view well suited for a variety of vascular and interventional procedures. The agility for steep angulations for angiography, cardiology, neurology and interventional applications. A gantry that rotates 20 degrees in just a second.

And a collision-avoidance system to speed every study.

The Innova 3100 is designed to maximize your convenience along with your confidence. With automated simplicity and ease of use that let you focus on your patients and procedures, not the system itself.

Using it, you can offer a broader range of clinical applications. Maintain exceptional image quality in every exam. And successfully treat a diversity of patients and cardiovascular conditions.



# Is Innova 3100 an angio system that delivers great cardiac?

#### Or a cardiac system that does superb anglo? Absolutely

The Innova 3100's detector provides a 30 cm field of view for anatomical coverage and a compact design to enable easy positioning for general angiography, cardiac and neurological procedures.

A 31-cm-square Revolution detector makes the Innova 3100 your top chales for performing both cardiovascular and Interventional procedures in one room.



#### The natural evolution of a Revolution

Upholding an image as remarkable as Innova's starts with GE's Revolution flat panel detector – the heart of the Innova family.

The Revolution detector is built to GE's Six Sigma-based quality standards, under our full manufacturing control for unmatched quality and reliability. And it's backed by 15 years of GE research and more than 160 patents.

Its exclusive design maximizes image quality, dose efficiency and clinical utility through:

- Industry-leading Detective Quantum Efficiency, or DQE the key clinical measurement of image quality and dose efficiency.
- Up to ten times the dynamic range of image-intensifier-based systems.
- · Artifact-free imaging edge-to-edge.
- · No geometric distortion or veiling glare.
- The technology to support advanced applications.

The result: Exceptional visualization of the largest patients and the smallest devices.

Fact is, the Revolution alone has more clinical applications than all other flat panel detectors combined. So it readily handles any diagnostic or interventional procedure on your schedule.

#### So many details. So little dose.

The Revolution detector shows you the finest details in every procedure you perform. Accurately size vessels and place stents. Easily measure your success in opening arteries. Obtain sharp images of large patients. And be more certain of your diagnostic decisions.

What's more, the Revolution does it all with proven dose efficiency. In study after published study, innova clearly demonstrated the ability to reduce dose as much as 50% compared to image-intensifier systems.

#### Innovation beyond imaging

Pinpoint a diagnosis on the first exam – and then treat that condition during the same study. Share clinical data and information effortlessly across your enterprise. Sharpen your clinical efficiency while honing your diagnostic accuracy. Raise your level of patient care to make your hospital a first choice for treatment.

At GE, we're just as committed to fighting heart and vascular disease as you are. That's why we've made sure solutions flow easily throughout your interventional lab.

Our advanced patient monitoring and information technologies, all seamlessly integrated, help you work faster and better. With less invasive diagnostic and treatment options, you can readily address the critical issues in healthcare today. And advanced GE technologies and services let you improve your department's performance while bringing better care to your patients – without missing a beat.

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# CANTEROTENIORAL POLICO ANTONIO

MVR 191 (Rev 01/06)

# CERTIFICATE OF TITLE

VEHICLE IDENTIFICATION NUMB
1LH142UH031012859
TITLE NUMBER
770207061284122

YEAR MODEL 2003 MAKE LAND

TITLE ISSUE DATE
05/13/2006

BODY STYLE TL

PREVIOUS TITLE NUMBER

liddhahaldadhalladaadhhalalhhalabdhal MEDCATH DIAGNOSTICS, LLC 10720 SIKES PL STE 300 CHARLOTTE NC 28277-8143 ODOMETER READING

ODOMETER STATUS

TITLE BRANDS

OWNER(S) NAME AND ADDRESS

MEDCATH DIAGNOSTICS, LLC 10720 SIKES PL STE 300 CHARLOTTE NC 28277-8140

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The Commissioner of Motor Vehicles of the State of North Carolina hereby certifies that an application for a certificate of title for the herein described vehicle has been filed persuant to the General Statutes of North Carolina and based on that application, the Division of Motor Vehicles is satisfied that the applicant is the lawful owner. Official records of the Division of Motor Vehicles reflect vehicle is subject to the liens, if any, herein enumerated at the date of issuance of this certificate.

SAVITNESS, his hand and seat of this Division of the day and year appearing in this certificate as the title issue date.

COMMISSIONER OF MOTOR VEHICLES

FIRST LIENHOLDER:

DATE OF LIEN

LIEN RELEASED BY:

TITLE

DATE

SECOND LIENHOLDER:

DATE OF LIEN

LIEN RELEASED BY:

SIGNATURE

THIRD LIENHOLDER:

DATE OF LIEN

EIEN RELEASED BY:

SIGNATURE \_\_\_\_

MATE

T FOURTH LIENHOLDER:

DATE OF LIEN

LIEN RELEASED BY:

SIGNATURE \_

TITLE \_\_\_

7.

ADDITIONAL LIENS:

122 TIE1228

ANY ALTERATIONS OR ERASURES VOID THE

#### BILL OF SALE

THIS BILL OF SALE is made this \_\_\_th day of \_\_\_\_\_\_, 2009 by PRESBYTERIAN HOSPITAL MATTHEWS, a North Carolina not-for-profit corporation ("Seller"), to MEDCATH PARTNERS, LLC, a North Carolina limited liability company ("Buyer").

WHEREAS, the Seller intends to sell and the Buyer intends to purchase certain assets specifically identified below; and

NOW THEREFORE, in consideration of Buyer's payment to Seller in the amount of Seven Hundred Fifty Three Thousand One Hundred Twenty Six Dollars (\$753,126), and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Seller has bargained and sold and by these presents does bargain, sell, assign, transfer and convey unto Buyer, its successors and assigns forever all of the right, title and interest of Seller in and to all of the assets listed on Schedule A (the "Assets"), attached hereto and incorporated by reference.

Seller hereby represents and warrants to Buyer, its successors and assigns, that (i) Seller has full legal and beneficial title to the Assets herein described, (ii) Seller has the good and lawful right to sell the Assets, and (iii) good and marketable title to the Assets herein described is hereby duly vested in Buyer free and clear of all claims, liens, encumbrances, and rights of others of any nature, in or to the Assets.

EXCEPT AS EXPRESSLY PROVIDED IN THIS BILL OF SALE AND ASSIGNMENT, SUCH ASSETS ARE BEING CONVEYED "AS IS" AND "WHERE IS" AS OF THE DATE OF THIS BILL OF SALE AND NO REPRESENTATIONS, WARRANTIES, COVENANTS OR AGREEMENTS, EITHER EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION WARRANTIES OF MERCHANTABILITY OR FITNESS FOR PARTICULAR PURPOSE, HAVE BEEN MADE BY SELLER OR RELIED UPON BY BUYER. Seller shall make available to Buyer any available warranties from the manufacturer(s) of the Assets.

As of the date hereof, Seller shall have no further obligation, whatsoever, with respect to the Assets, including, without limitation, the maintenance or repair thereof. Notwithstanding the foregoing, the Seller shall indemnify, defend and hold harmless the Buyer from any and all loss, cost (including, without limitation, reasonable attorneys' fees and costs of suit), claim, damage, liability and the like relating, in any way, to the Seller's ownership or use of the Assets prior to the date hereof.

This validity, interpretation, construction and performance of this Bill of Sale shall be governed by the internal laws of the State of North Carolina, without regard to the conflict of law principles thereof.

[Execution Page Follows]

IN WITNESS WHEREOF, Seller has caused this Bill of Sale to be duly executed under seal as of the date first above written.

SELLER:	
PRESBYTERIAN HOSPITAL MATTHEW	S
By: Title: Date:	

# **SCHEDULE A**

# Assets

General Electric Innova 3100 Serial #557462BU9

United States | Contact Us



SEARCH

1660

home products

service & support

education

solutions & consulting

patient health

news

about us

#### Innova 3100

Home

**Products and Solutions** 

X-rav

Cardiovascular

Innova 3100

Cardiovascular

Innova 2100<sup>IQ</sup>

Cardiac Mobile C-Arm

Innova 4100<sup>IQ</sup>

Innova 3100

Inova IVUS





All-Digital Cardiovascular and Interventional Imaging Customer Testimonial (PDF)

Innova. Pure Innovation. Proven performance.



How do you inject greater confidence into your practice? Operate with the world's most tried and trusted all-digital cardiovascular and interventional imaging systems.

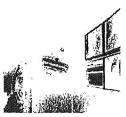
The Innova® line of systems is built on GE's Industry-leading Revolution™ detector technology for unmatched image quality, and the only demonstrated dose savings.

That's why you'll find Innova in more labs than all other systems combined. More than 1100 installations strong and counting, Innova helps more physicians clearly visualize fine

vessels. Precisely place more stents. Successfully perform more lifesaving procedures than any other digital cardiovascular imaging system.

With Innova, you conduct every study with a confidence proven in practice. And the reassurance that every detail is clearly in sight.

### Innova 3100



Exceptional anglo. Superb cardlac. One remarkable system.

Only the Innova 3100 lets you perform exams from cardiac to anglo. On one system. In one room. With no compromises,

An ideal 31 centimeters square, it's perfectly designed for a wide range of cardiovascular and interventional imaging. With a field of view well suited for a variety of vascular and interventional procedures. The agility for steep angulations for englography, cardiology, neurology and interventional applications. A gantry that rotates 20 degrees in just a second.

And a collision-avoidance system to speed every study.



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Or a cardiac system that does superb anglo?

The Innova 3100's detector provides a 30 cm field of view for anatomical coverage and a compact design to enable easy positioning for general angiography, cardiac and neurological procedures.

A 31-cm-square Revolution detector makes the innova 3100 year top chaice for performing both cardiovascular and interventional procedures



Upholding an image as remarkable as Innova's starts with GE's Revolution flat panel detector - the heart of the innova family.



The Revolution detector is built to GE's Six Sigma-based quality standards, under our full manufacturing control for unmatched quality and reliability. And it's backed by 15 years of GE research and more than 160 patents.

Its exclusive design maximizes image quality, dose efficiency and clinical utility through:

- Industry-leading Detective Quantum Efficiency, or DQE the key clinical measurement of image quality and dose efficiency.
  Up to ten ilmes the dynamic range of image-intensifier-based systems.
- - Artifact-free Imaging edge-to-edge.
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What's more, the Revolution does it all with proven dose efficiency. In study after published study, Innova clearly demonstrated the ability to reduce dose as much as 50% compared to image-intensifier systems.

#### Innovation beyond imaging

Pinpoint a diagnosis on the first exam – and then treat that condition during the same study. Share clinical data and information effortlessly across your enterprise. Sharpen your clinical efficiency while honing your diagnostic accuracy. Raise your level of patient care to make your hospital a first choice for treatment.

At GE, we're just as committed to fighting heart and vascular disease as you are. That's why we've made sure solutions flow easily throughout your interventional lab.

Our advanced patient monitoring and information technologies, all seamlessly integrated, help you work faster and better. With less invasive diagnostic and treatment options, you can readily address the critical issues in healthcare today. And advanced GE technologies and services let you improve your department's performance while bringing better care to your patients – without missing a beat.

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#### BILL OF SALE

THIS BILL OF SALE is made this 7<sup>th</sup> day of June, 2010 by PRESBYTERIAN MEDICAL CARE CORP, a North Carolina not-for-profit corporation ("Seller"), to Philips Medical Capital, LLC, a Delaware Limited Liability Company ("Buyer").

WHEREAS, the Seller intends to sell and the Buyer intends to purchase certain assets specifically identified below; and

NOW THEREFORE, in consideration of Buyer's payment to Seller in the amount of Six Hundred Forty Five Thousand Five Hundred Thirty Seven Dollars and 60/100 (\$645,537.60), and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Seller has bargained and sold and by these presents does bargain, sell, assign, transfer and convey unto Buyer, its successors and assigns forever all of the right, title and interest of Seller in and to all of the assets listed on Schedule A (the "Assets"), attached hereto and incorporated by reference.

Seller hereby represents and warrants to Buyer, its successors and assigns, that (i) Seller has full legal and beneficial title to the Assets herein described, (ii) Seller has the good and lawful right to sell the Assets, and (iii) good and marketable title to the Assets herein described is hereby duly vested in Buyer free and clear of all claims, liens, encumbrances, and rights of others of any nature, in or to the Assets.

EXCEPT AS EXPRESSLY PROVIDED IN THIS BILL OF SALE AND ASSIGNMENT, SUCH ASSETS ARE BEING CONVEYED "AS IS" AND "WHERE IS" AS OF THE DATE OF THIS BILL OF SALE AND NO REPRESENTATIONS, WARRANTIES, COVENANTS OR AGREEMENTS, EITHER EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION WARRANTIES OF MERCHANTABILITY OR FITNESS FOR PARTICULAR PURPOSE, HAVE BEEN MADE BY SELLER OR RELIED UPON BY BUYER. Seller shall make available to Buyer any available warranties from the manufacturer(s) of the Assets.

As of the date hereof, Seller shall have no further obligation, whatsoever, with respect to the Assets, including, without limitation, the maintenance or repair thereof. Notwithstanding the foregoing, the Seller shall indemnify, defend and hold harmless the Buyer from any and all loss, cost (including, without limitation, reasonable attorneys' fees and costs of suit), claim, damage, liability and the like relating, in any way, to the Seller's ownership or use of the Assets prior to the date hereof.

This validity, interpretation, construction and performance of this Bill of Sale shall be governed by the internal laws of the State of North Carolina, without regard to the conflict of law principles thereof.

[Execution Page Follows]



IN WITNESS WHEREOF, Seller has caused this Bill of Sale to be duly executed under seal as of the date first above written.

SELLER:

PRESBYTERIAN MEDIÇAL CARE CORP.

# SCHEDULE A

# Assets

General Electric Innova 3100 Serial #557462BU9

# Exhibit E Mobile Unit Route

Mariah Parham Medical Center

Henderson, NC



# **Checklist for Acquisition of Replacement Equipment**

1. A comparison of the existing and replacement equipment, using the format in the attached table.

See table enclosed.

2. A description of the basic technology and functions of the existing and replacement equipment, including the diagnostic and treatment purpose for which the equipment is used or capable of being used.

See table enclosed

3. Brochure or letters form the vendors describing the capabilities of the equipment.

See enclosed GE Medical literature.

4. A copy of the purchase agreement and lease for the existing equipment, including all components and original sales price.

See bill of sale attached.

5. A copy of the title, if any, for the existing equipment or the capital lease for the existing equipment.

See bill of sale attached.

6. If replacement equipment is to be leased...

Not applicable

7. If replacement equipment is to be purchased a copy of proposed purchase agreement, including the price of all component to be leased and monthly payment schedule.

See Purchase agreements for Presbyterian Hospital Matthews.

8. A letter from the person taking possession of the existing equipment that acknowledges the existing equipment: will be permanently removed from North Carolina, will no longer be exempt from requirements of the North Carolina Certificate of Need Law, and will not be used in North Carolina without first obtaining a new Certificate of Need.

There is no CON attached to the trailer in which the equipment will be installed.

9. Documentation that the existing equipment is currently in use and has not been taken out of service.

See contract extension with Novant Health Matthews Medical Center for contract termination of December 7, 2013.

# **EQUIPMENT COMPARISON**

	EXISTING EQUIPMENT	REPLACEMENT EQUIPMENT
Type of Equipment (List Each Component)	cardiac cath lab	cardiac cath lab
Manufacturer of Equipment	GE	GE
Tesla Rating for MRIs	N/A	N/A
Model Number	Innova 3100	Innova 3100
Serial Number	402411BU3	402411BU3
Provider's Method of Identifying Equipment	N/A	N/A
Specify if Mobile or Fixed	Fixed	Mobile
Mobile Trailer Serial Number∕VIN #	N/A	1S9FS5025X1182289
Mobile Tractor Serial Number/VIN #	N/A	Outsourced
Date of Acquisition of Each Component	6/7/2010	6/7/2010
Does Provider Hold Tittle to Equipment or Have a Capital Lease?	Holds Title	Holds Title
Specify if Equipment Was/Is New or Used When Acquired	Used	Nsed
Total Capital Cost of Project (Including Construction, etc.) *Use attached		
form*	N/A	N/A
Total Cost of Equipment	753,126	753,126
Fair Market Value of Equipment	753,126	753,126
Net Purchase Price of Equipment	753,126	753,126
Location Where Operated	See attached mobile route list	See attached mobile route list
Number days in Use/To be Used in N.C. Per Year	250	250
Percent Change in patient Charges (by Procedure)	N/A	.%0
Percent of Change in Per Procedure Operating Expenses (by Procedure)	N/A	%0
Type of Procedures Currently Performed on Existing equipment	cardiac catheterizations	N/A
Type of Pricedures New Equipment is Capable of Performing	N/A	cardiac catheterizations

