

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor KODY H. KINSLEY • Secretary MARK PAYNE • Director, Division of Health Service Regulation

VIA EMAIL ONLY

December 8, 2022

Elizabeth V. Kirkman Elizabeth.Kirkman@atriumhealth.org

Exempt from Review – Replacement Equipment					
Record #:	4055				
Date of Request:	September 30, 2022				
Facility Name:	Atrium Health Cleveland				
FID #:	953106				
Business Name:	Charlotte-Mecklenburg Hospital Authority				
Business #:	1770				
Project Description:	Replace CT Scanner				
County:	Cleveland				

Dear Ms. Kirkman:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced project is exempt from certificate of need review in accordance with G.S. 131E-184(f). Therefore, you may proceed to acquire without a certificate of need the GE Revolution Apex CT scanner to replace the GE VCT 64 CT scanner. The existing GE VCT 64 CT scanner will be retained as its fair market value is less than \$2 million.

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

Sincerely,

Ena Lightbourne Project Analyst

Micheala Mitchell

Micheala Mitchell Chief

cc: Acute and Home Care Licensure and Certification Section, DHSR Radiation Protection Section, DHSR Construction Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603 MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704 https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873 September 30, 2022

Ms. Micheala Mitchell, Chief Healthcare Planning and Certificate of Need Section Division of Health Service Regulation N.C. Department of Health & Human Services 809 Ruggles Drive Raleigh, NC 27603

RE: Exemption Request for The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health Cleveland ("AH Cleveland") to Replace a CT Scanner

Dear Ms. Mitchell:

The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health Cleveland ("AH Cleveland"), seeks to acquire a GE Revolution Apex CT scanner ("Replacement Equipment"). Please see Attachment A for a copy of AH Cleveland's current hospital license. The Replacement Equipment will replace a GE VCT 64 CT scanner ("Existing Equipment") that was purchased in 2010 and is beyond its useful service life. The Existing Equipment is currently housed in room CT A on the first floor of AH Cleveland's main hospital building located at 201 East Grover Street in Shelby, NC 28150 (see Attachment B).

The purpose of this letter is to provide the Agency with notice and to request a determination that AH Cleveland's purchase of the Replacement Equipment is exempt from Certificate of Need ("CON") review under the replacement equipment exemption provisions contained in Session Law 2013-360, Section 12G.3(b) and Session Law 2013-363, Section 4.6 (which are codified at N.C. Gen. Stat. 131E-184(f)(1)-(3)).

The General Assembly has chosen to exempt certain, otherwise reviewable events from CON review. Among those exemptions is the acquisition of "replacement equipment," defined as follows in the CON law:

"Replacement equipment" means equipment that costs less than two million dollars (\$2,000,000) and is purchased for the sole purpose of replacing comparable medical equipment currently in use which will be sold or otherwise disposed of when replaced.

See N.C. Gen. Stat. 131E-176(22a). Under the new provisions found at N.C. Gen. Stat. 131E-184(f)(1)-(3), the CON law provides:

- (f) The Department shall exempt from certificate of need review the purchase of any replacement equipment that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(22) if all of the following conditions are met:
 - (1) The equipment being replaced is located on the main campus.

- (2) The Department has previously issued a certificate of need for the equipment being replaced. This subdivision does not apply if a certificate of need was not required at the time the equipment being replaced was initially purchased by the licensed health service facility.
- (3) The licensed health service facility proposing to purchase the replacement equipment shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.

See Session Law 2013-360, Section 12G.3(b) and Session Law 2013-363, Section 4.6. The term "main campus" was defined in Session Law 2013-360, Section 13G.3(a) (codified N.C. Gen. Stat. 131E-176(14n)) as follows:

- (14n) "Main campus" means all of the following for the purposes of G.S. 131E-184(f) and (g) only:
 - a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
 - b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building.

The Existing Equipment is currently located in room CT A on the first floor of AH Cleveland's main hospital building, which is the site from which AH Cleveland provides clinical patient services and exercises financial and administrative control over the entire facility (see Attachment B). AH Cleveland's Facility Executive's office is located on the second floor of the main hospital building. Please see a copy of AH Cleveland's license in Attachment A.

In addition to the foregoing, AH Cleveland's proposal qualifies for this exemption based on the following information:

A. Cost of the Replacement Equipment

The purchase price of the Replacement Equipment is 1,287,000 (1,200,000 CT Scanner and freight + 87,000 tax). The projected total cost of this project is 3,104,197 and includes the cost to acquire, install and make operational the Replacement Equipment. Attachment C provides the quote for the Replacement Equipment. The total capital cost worksheet is provided in Attachment D.

B. Equipment Being Replaced is Located on the Main Campus

The Existing Equipment is currently located in room CT A on the first floor of AH Cleveland's main hospital building. The Replacement Equipment will be located in the same location as the Existing Equipment (see Attachment B).

C. Certificate of Need Issued for Equipment Being Replaced

This proposal also fits within the exemption criterion in Section 131E-184(f)(2) because the Department issued a Certificate of Need for the Existing Equipment (see Attachment E). The Existing Equipment was installed in 2010.

Please note, the Certificate of Need for the Existing Equipment was issued prior to the 2015 merger of Cleveland County Healthcare System ("CCHS") – which included Cleveland Regional Medical Center, which was formerly known as Cleveland Memorial Hospital and is now known as AH Cleveland -- into CMHA. Please see Attachment E for copy of the certificate as well as a copy of the Agency's approval of CMHA's exemption request to acquire Cleveland Regional Medical Center and its assets.

D. <u>Comparable Equipment</u>

The CON rule codified as 10A N.C.A.C. 14C.0303 (the "Regulation") defines "comparable medical equipment" in subsection (c) as follows:

"Comparable medical equipment" means equipment which is functionally similar and which is used for the same diagnostic or treatment purposes.

AH Cleveland intends to use the Replacement Equipment for substantially the same CT procedures for which it currently uses the Existing Equipment. The Existing Equipment is a GE VCT 64 CT Scanner that was acquired in 2010. The Existing Equipment has been used for CT procedures since it was acquired.

The Replacement Equipment will perform all procedures currently performed on the Existing Equipment. Although it possesses some expanded capabilities due to technological improvements, the Replacement Equipment will perform the same CT procedures (see Attachment F for the Equipment Brochure). The Replacement Equipment is therefore "comparable medical equipment" as defined in Subsection (c).

Furthermore, AH Cleveland does not intend to increase patient charges or per procedure operating expenses within the first 12 months after equipment acquisition. For further equipment comparison, please refer to Attachment G, the Equipment Comparison Chart.

Subsection (d) of the regulation further provides:

- (1) it has the same technology as the equipment currently in use, although it may possess expanded capabilities due to technological improvements; and
- (2) it is functionally similar and is used for the same diagnostic or treatment purposes as the equipment currently in use and is not used to provide a new health service; and
- (3) the acquisition of the equipment does not result in more than a 10.0 percent increase in patient charges or per procedure operating expenses within the first twelve months after the replacement equipment is acquired.

The Replacement Equipment will meet all three of tests set out in Subsection (d). The Replacement Equipment satisfies the technology and functionality tests in Subsection (1) and

(2) as discussed above and identified in the Comparison Chart (Attachment G). Moreover, AH Cleveland represents the use of the Replacement Equipment will not result in the types of expense or charge increases described in Subsection (d)(3).

Documentation provided in Attachment H indicates that 12,851 scans were performed from August 2021 to July 2022 on the Existing Equipment.

E. Existing Equipment

The Existing Equipment, which is located in room CT A on the first floor of AH Cleveland's main hospital building has a maximum fair market value (FMV) of \$150,000 (see Attachment I for FMV analysis). AH Cleveland proposes to retain the Existing Equipment since the FMV of this equipment is less than \$2,000,000 and does not trigger the CON reviewability threshold for "major medical equipment" under N.C.G.S 131E-176(14o). The retained Existing Equipment will be relocated to Atrium Health Cleveland Imaging and will continue to be used for all primary CT applications. The total cost to acquire, install and make operational the retained Existing Equipment at Atrium Health Cleveland Imaging is less than \$2,000,000.

CONCLUSION:

Based on the foregoing information, AH Cleveland hereby requests that the Agency provide a written response confirming that the acquisition of the Replacement Equipment and the retention of the Existing Equipment described herein is exempt from CON review. If the Agency needs additional information to assist in its consideration of this request, please let us know.

Thank you for your consideration of this notice.

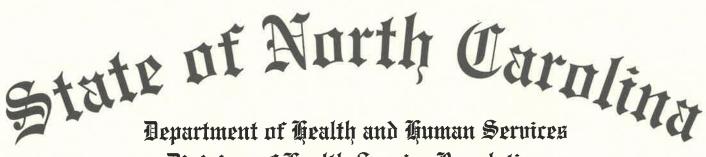
Sincerely,

Elepabeth V, Kerkaran

Elizabeth V. Kirkman Assistant Vice President Atrium Health Enterprise Strategy Partners

Attachments

Attachment A



Division of Health Service Regulation

Effective January 01, 2022, this license is issued to The Charlotte Mecklenburg Hospital Authority

to operate a hospital known as Atrium Health Cleveland located in Shelby, North Carolina, Cleveland County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall remain in effect until amended by the issuing agency.

> Facility ID: 953106 License Number: H0024

Bed Capacity: 308 General Acute 288, Psych 14, Substance Abuse 6,

Dedicated Inpatient Surgical Operating Rooms:1Dedicated Ambulatory Surgical Operating Rooms:0Shared Surgical Operating Rooms:8Dedicated Endoscopy Rooms:5

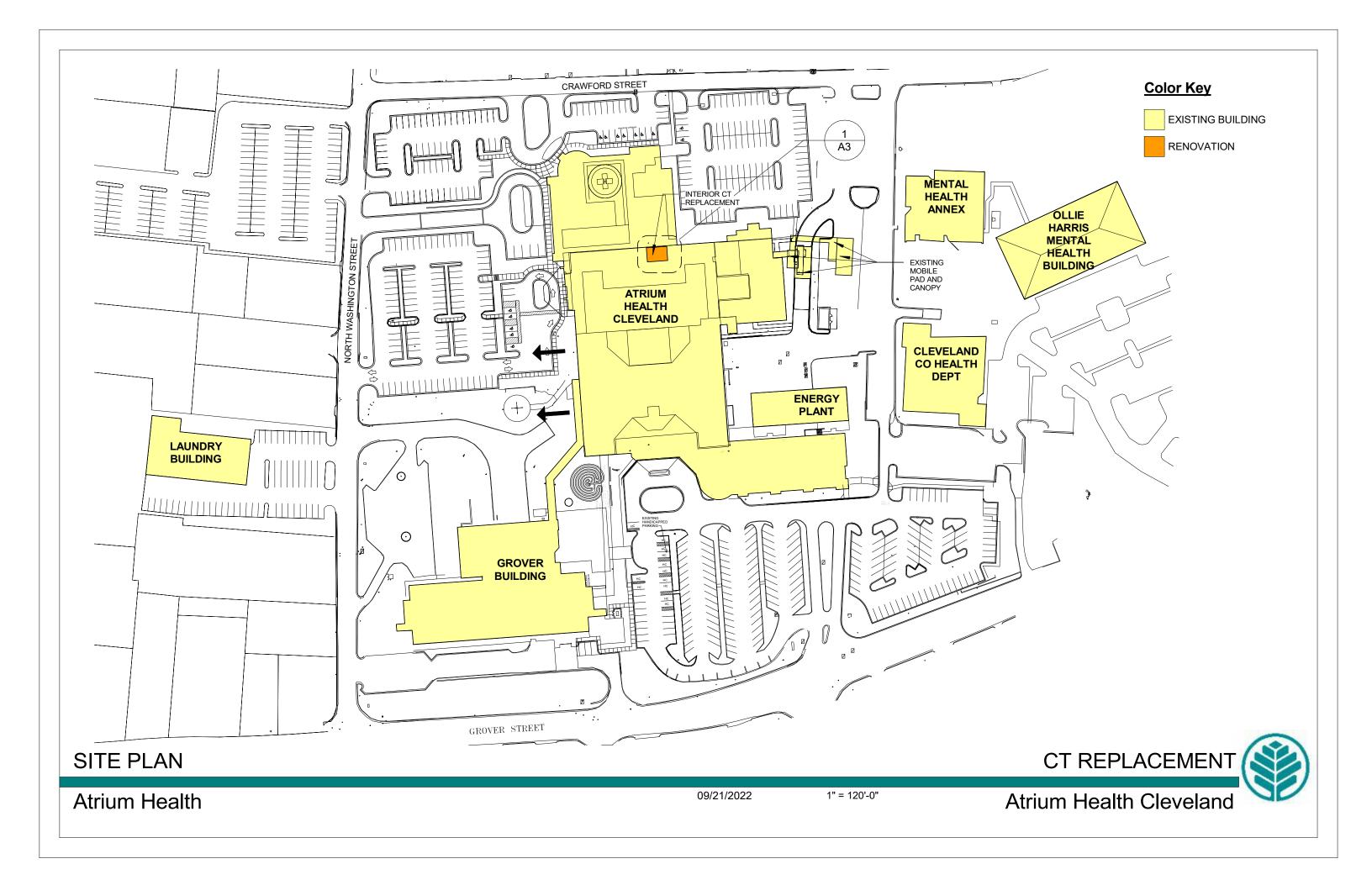
Authorized by:

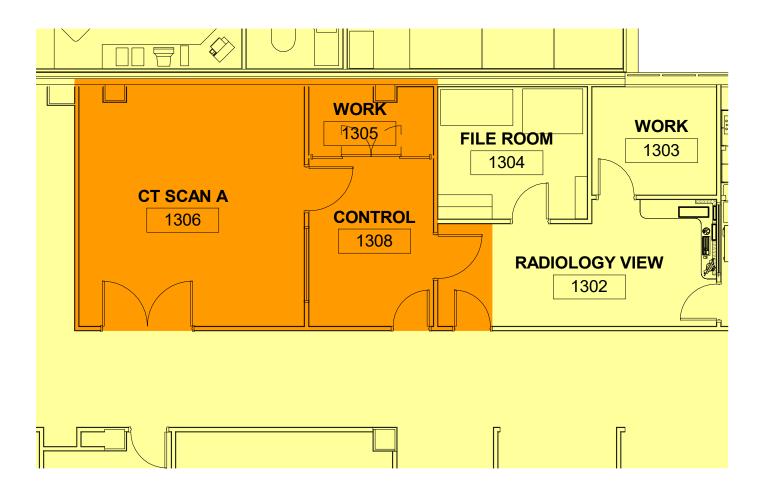
Secretary, N.C. Department of Health and Human Services



Director, Division of Health Service Regulation

Attachment B





ENLARGED EXISTING LEVEL 01 PLAN

Atrium Health

09/21/2022

1/8" = 1'-0"

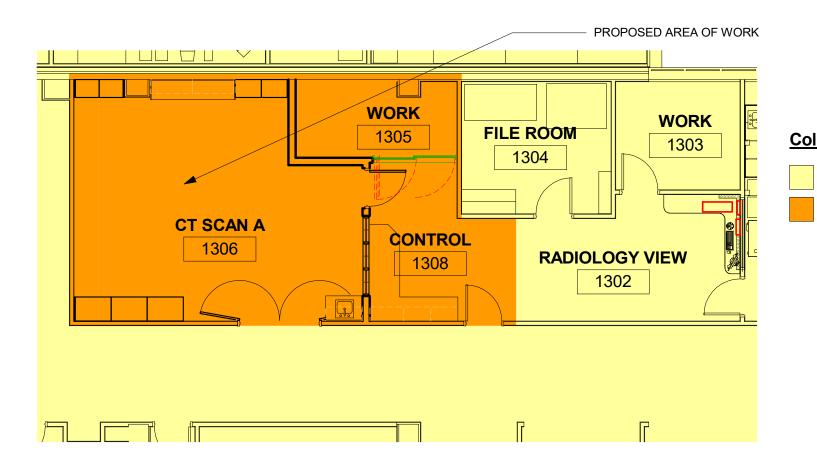
Color Key



EXISTING BUILDING

RENOVATION





ENLARGED PROPOSED LEVEL 01 PLAN

Atrium Health

09/21/2022

<u>Color Key</u>

EXISTING BUILDING

RENOVATION



Attachment C



September 14, 2022 Quote Number: **2008924543.3** Customer ID: **1-2313Pl** Agreement Expiration Date: **11/13/2022**

Atrium Health Cleveland 201 E Grover St Shelby, NC 28150-3917

This Agreement (as defined below) is by and between the Customer and the GE Healthcare business ("<u>GE Healthcare</u>"), each as identified below for the sale and purchase of the Products and/or Services identified in this Quotation, together with any applicable schedules referred to herein ("Quotation"). "<u>Agreement</u>" is this Quotation and either: (i) the Governing Agreement identified below; or (ii) if no Governing Agreement is identified, the GE Healthcare Terms and Conditions and Warranties that apply to the Products and/or Services identified in this Quotation. In the event of conflict, the Quotation supersedes.

GE Healthcare can withdraw this Quotation at any time before Customer: (i) signs and returns this Quotation or (ii) provides evidence of Quotation acceptance satisfactory to GE Healthcare ("Quotation Acceptance"). On Quotation Acceptance, this Agreement is the complete and final agreement of the parties relating to the Products and/or Services identified in this Quotation. There is no reliance on any terms other than those expressly stated or incorporated by reference in this Agreement and, except as permitted in this Agreement, no attempt to modify will be binding unless agreed to in writing by the parties. Modifications may result in additional fees and cannot be made without GE Healthcare's prior written consent.

Handwritten or electronic modifications on this Agreement (except an indication of the form of payment, Customer purchase order number and signatures on the signature blocks below) are void.

Governing Agreement:	CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031
Terms of Delivery	FOB Destination
Billing Terms	100% billing at Ship Completion (Fulfillment) / Delivery
Billing Frequency(Subscriptions)	Annually
Payment Terms	Net Due in 60 Days
Total Quote Net Selling Price	\$1,200,000.00
Sales and Use Tax Exemption	No Certificate on File
Catalog + Subscription Initial Payment	\$1,200,000.00

IMPORTANT CUSTOMER ACTIONS:

Please select your planned source of funds. Source of funds is assumed to be cash unless you choose another option. Once equipment has been shipped, source of funds changes cannot be allowed.

____ Cash

___ GE HFS Loan

- ____ Other Financing Loan
- ____ GE HFS Lease

Provide Finance Company Name

The parties have caused this Agreement to be executed by their authorized representative as of the last signature date below.

Other Financing Lease

Atrium Health Cleveland	
Signature:	
Print Name:	
Title:	
Date:	
Purchase Order Number, if applicable	

GE Precision Healthcare LLC, a GE Healthcare business

Signature: TARA CHAPMAN

Title: Imaging Account Manager

Date: September 14, 2022



Please remit payment for invoices associated with this

To Accept This Quotation

Please sign and return this quotation together with your Purchase Order to:

Name: TARA CHAPMAN

Email tara.chapman@ge.com

Phone: 704-640-2778

Fax:

Name: Jim Benecki

Email: jim.benecki@ge.com

Phone: (615) 390-3634

Fax: (910) 401-1049

Atrium Health Cleveland

Addresses:

Bill To:Atrium Health ClevelandShip To:Atrium Health Cleveland

To Accept This Quotation

201 E Grover St, Shelby, NC, US, 28150-3917 201 E Grover St, Shelby, NC, US, 28150-3917

Payment Instructions

GE Precision Healthcare LLC

quotation to:

P.O. Box 96483

Chicago, IL 60693

FEIN: 83-0849145

- Please sign the quote and any included attachments (where requested).
- If requested, please indicate your form of payment.
- If you include a purchase order, please make sure it references the following information:
 - The correct Quote number and Version number above
 - The correct Remit To information as indicated in "Payment Instructions" above
 - Your correct SHIP TO and BILL TO site name and address
 - The correct Total Price as indicated above

Upon submission of a purchase order in response to this quotation, GE Healthcare requests the following to evidence agreement to contract terms: Signature page on quote filled out with signature and P.O. number **** OR**** Verbiage on the purchase order must state one of the following:

(i)Per the terms of Quotation # _____, (ii) Per the terms of GPO # _____; (iii) Per the terms of MPA# _____: or (iv) Per the terms of SAA #

Include applicable quote/agreement number with the reference on the purchase order. In addition, Source of Funds (choice of Cash/Third Party Load or GE HFS Lease Loan or Third Party Lease through ______), must be indicated, which may be done on the Quote Signature Page (for signed quotes), or the Purchase Order (where quotes are not signed) or via a separate written source of funds statement (if provided by GE Healthcare)."



Line

3

Catalog Item Details

	-	~ .	
Line 1	Qty. 1.00	Catalog Y0000LC	Pricing Non-Disclosure Language
-			
			e shared with any third parties, buying evaluation groups or anyone not directly employed and in relation to a national show-site agreement, research partnership, or other non-standard
			ie will happily provide a list price quote.
	1	1 0,	
Line	Qty.	Catalog	
2	1.00	S7919BM	Revolution Apex Power Xtream
your best image ap	image. Revol	ution Apex has a	ext-generation, ultra-premium Computed Tomography scanner to provide the new way to chieved a breakthrough in image quality to have outstanding image definition, natural he same time. You will have the image quality that you need to deliver a powerful first
Revolutio			nised set of clinical solutions for your most challenging patients to ensure you achieve your
1-beat Ca	ardiac at any h	eart rate, even in	Atrial Fibrillation
			for patients with heavily calcified coronaries
			ts with impaired renal function
			sion, without the need to shuttle the table
		for adults and ob	
			ssively obese patients
		CT workup in les	or patients who cannot hold their breath
		minimal need fo	
With the spatial re	power of a ne solution, temp	w image chain, R ooral resolution, c	evolution Apex Power Xtream has elevated what you can expect from industry leading overage and spectral imaging:
	n 1,300 mA X		
		a single axial exp	oosure poral resolution utilizing SnapShot Freeze 2
			the latest image reconstruction technologies
50 cm FC		ig empowered by	the fatest mage reconstruction comologies
		witching Spectra	l Imaging option is available with GSI Xtream
80 cm bo	re size		
Revolutio	on Apex has b	een designed witl	h future upgradability as a key goal to ensure longevity of the state of the art technology to
help you	continually pr	ovide best in clas	as care to your patients.
			nfiguration additionally includes the following: ct reduction solution
	ase – which ca red range	an be utilized foll	owing a cardiac scan to determine the optimal phase location for coronary imaging within
	d cardiac mod	ule	

NG2000V patient table The NG2000V standard patient table has been exclusively designed for GEHC Ultra-premium CT systems.

The patient table features: Maximal metal free horizontal scannable range: 2000 mm Maximal table load: 227 kg / 500 lbs Maximal horizontal travel speed: 300 mm/s (standard) (437.5 mm/s optional with HyperDrive) Horizontal positioning accuracy +/- 0.25 mm from any direction

Catalog

B7919JL

Qty.

1.00



Motor-driven table height adjustment from min. 550 mm to max. 1030 mm Maximal vertical travel speed: 40 mm/s

10x more stiffness design to meet AAPM TG66 guideline specification.

Integrated ECG module with waveform and configuration through the gantry display

Workflow hub area with a see-through tray to give you the most flexibility in placing scanning related supplies, etc. without limiting visibility to the integrated ECG inputs.

IV Pole integrated at the foot-end of the table helps to prevent IV lines from becoming crossed and tangled and helps keep lines in place during patient table travel.

The X-strong foot switch cover, capable of supporting 612 kg / 1350 lbs load, has been specially designed to support physicians or technologies to stand atop of it to implement diagnostic and/or treatment procedures to patients.

Line	Qty.	Catalog	
4	1.00	B7919AE	Standard cable set for GEHC ultra-premium CT systems
Line	Qty.	Catalog	
5	1.00	B7918EN	English keyboard
Line	Qty.	Catalog	
6	1.00	B7919KG	ICM Accessories 2000 Table

The accessories of Integrated Cardiac Monitor (ICM) for 2000mm regular and heavy tables on Revolution Apex, Revolution CT, Revolution CT ES.

Line	Qty.	Catalog	
7	1.00	B7919FF	Neuro MultiPhase CTA Protocols

· Neuro Multiphase CTA protocols is the group of CT acquisition protocols for multiphase CT angiography, an imaging tool that provides three time-resolved images of pial arterial filling in the whole brain, that can be used to predict clinical outcomes in patients with acute ischemic stroke.

• Neuro Multiphase CTA Protocols is the purchasable option of Revolution CT 2016 summer release.

Line	Qty.	Catalog	
8	1.00	B7919FX	HyperDrive on GE ultra-premium CT systems

HyperDrive is an unmatched high pitch scan mode on GE ultra-premium CT systems that combined wide coverage acquisition with high pitch helical techniques to achieve speeds up to 437 mm/s with uncompromised 50 cm field of view and image quality. This additional scan mode is especially beneficial in trauma or pediatrics environments.

Line	Qty.	Catalog	
9	1.00	B7919SG	Low Dose CT Lung Cancer Screening SW Option

This option provides lung screening reference protocols that are tailored to the CT system, patient size (small, average large), and the most current recommendations from a wide range of professional medical and governmental organizations. Now, qualified GE Healthcare CT scanners with this option are formally indicated for, and can be confidently used by physicians for low dose CT lung cancer screening of identified high-risk patient populations. These protocols deliver low dose, short scan times, and clear and sharp images for the detection of small lung nodules. Early detection from an annual lung screening with low dose CT in high-risk individuals can prevent a substantial number of lung cancer-related deaths.



Line	Qty.	Catalog	
10	1.00	B7919ST	Enhanced Xtream Injector with Cables

Enhanced Xtream Injector Kit contains software key and connection cables(power and signal) to allow the seamless communication between GE Revolution CT family scanners and contrast injectors with Class IV controller area network (CAN) technology. The resulting injector and CT scanner integration benefits may include: Reduced overall programming time

Improved scanner and injector protocol matching through programming of the injector from the scanner console

Better control over contrast injection procedure with a synchronized CT scan start time.

Preview injection parameters before beginning the scan.

Complete post-study reviews of injection results at the scanner console.

Automatic documentation of the injection results in PACS

Line	Qty.	Catalog	
11	1.00	B7919GH	Rear Gantry Display

Optional Revolution CT rear gantry display showing patient information, patient comforting videos, and current scan parameters such as kV, mA, scan time, table position, heart rate and ECG trace (from integrated ECG module)

Line	Qty.	Catalog	
12	1.00	B78552CA	CT Operator Console Desk

The Freedom workspace is an ergonomic working environment specifically designed for use with the GE Healthcare imaging systems. The sleek table design enables the efficient use of space while enhancing clinical workflow and technologist comfort.

The Freedom workspace provides a minimalist footprint to improve patient visibility and giving the user easier access to patients in the imaging suite.

It offers sit/stand and horizontal/vertical monitor flexibility. It can also help reduce noise and heat with remote location options of the console. The non-adjustable Freedom workspace version is 1300mm long x 895mm wide x 850mm height and weighs 55.8kg.

Line	Qty.	Catalog			
13	1.00	B7660B	Chair		

Chair for CT scanner

Line	Qty.	Catalog	
14	1.00	B77292CA	CT Service Cabinet

Service cabinet for system accessories storage

Line	Qty.	Catalog	
15	1.00	B7864PZ	Eaton 14.4 KVA 3-Phase Partial System UPS for GE CT and PET/CT Scanners

Eaton's 14.4 KVA 3-Phase partial system UPS (Uninterruptible Power Supply) has been specifically configured to coordinate with compatible GE CT and PET/CT scanners.

The partial system UPS provides clean, reliable, constant voltage power to the scanner electronics. It helps protect the system's sensitive electronic components from damaging power anomalies such as high frequency noise transients and over voltage and under voltage conditions.

Utilizing the Partial system UPS can help maintain user productivity and improve system reliability. It can also help to reduce service costs and prevent system downtime.

Specifications:



- 1. Rating: 14.4 KVA
- 2. Input voltage range: three phases; 102-132V/phase
- 3. Input frequency range: 45-65 Hertz
- 4. Input power factor: >95% typical
- 5. Output frequency: 50 or 60 Hertz, autosensing
- 6. Output regulation: <3% steady state for all conditions of line and load
- 7. Voltage distortion: <5% threshold
- 8. Overload capacity: 110% for 10 minutes; 125% for 1 minute; 149% for 5 seconds.
- 9. Efficiency: >90% typical
- 10. Battery backup time: >10 minutes typical
- 11. Battery recharge time: < 3 hours to 80% capacity typical
- 12. Operating temperature: 50°F 104°F (10°C 40°C)
- 13. Floor heat dissipation: 5122 BTU/hour typical @11.5 KVA
- 14. Humidity: 20-80% relative humidity, non-condensing
- 15. Audible noise (norm mode): <60 dBA @1 meter
- 16. Dimensions (H x W x D): 49 inches x 12 inches x 32 inches (1245 mm x 305 mm x 813 mm)
- 17. Weight: 620 lbs (277 kg)

NOTE: THE PARTIAL SYSTEM UPS HAS DIFFERENT INTERACTIONS WITH COMPATIBLE SCANNERS, BASED ON DIFFERENT SCANNER POWER ARCHITECHURE. REFER TO THE PARTIAL SYSTEM UPS PRODUCT DATA SHEET FOR DETAILS.

NOTE: ITEM IS NON-RETURNABLE AND NON-REFUNDABLE

NOTE: REMOVAL/DISPOSAL OF OLD UPS IS THE CUSTOMERS RESPONSIBILITY

NOTE: CONTACT GE SERVICE OR EATON FOR START-UP ASSISTANCE

Line	Qty.	Catalog	
16	1.00	E8007WJ	CTM-400 Cardiac Trigger Module - America and Asia

Ivy Biomedical's CTM-400 Cardiac Trigger Module is a sophisticated Computer Tomography (CT) gating module that synchronizes a patient's ECG to remove motion artifacts when generating cardiac or other physiological images. The CTM-400 is completely integrated with GE Healthcare CT Revolution[™] scanner and installed directly into the gantry table. It communicates with the CT system via a standard serial communications link and requires less than 5 watts from a +8 to +24V medical grade power supply.

Imaging Applications

The CTM-400 module is intended primarily for use on patients in applications requiring precision R-wave synchronization such as timed imaging studies Simultaneously ECG vectors and the ECG trigger are sent to the CT system.

Intuitive Operation

Built-in LED indicators provide visual status of power, and system communication while a varied intensity light pipe illuminates the perimeter of the module during use. An RS-422 D-sub 15-position standard density network interface connector provides two-way communications between the module and the external console.

The Ivy CTM-400 Cardiac Trigger module is completely integrated with the CT Revolution scanner and installed directly into the gantry table.



September 14, 2022 Quote Number: 2008924543.3 Customer ID: 1-2313Pl Agreement Expiration Date: 11/13/2022

17 1.00 E8016DA CT Table Slicker for CT Revolution 2000 Table only

The GEHC Revolution CT and Revolution Apex table slicker is specifically designed to maximize contaminant protection. Manufactured to be used in conjunction with the table restraining belts, this slicker adds versatility to your CT procedures. Latex free, it is strongly suggested that the slicker is cleaned with a water/bleach solution prior to every procedure.

Features:

- Table gray cushion sealed in vinyl slicker Dimension 2403 x 788
- Table extender gray cushion sealed in vinyl slicker Dimension 406 x 788
- Increase system uptime by protecting table from spills and particulate contaminants
- · Easy to install and comfortable for patients
- Will not interfere with normal operation of CT table
- · Clear PVC plastic facilitates faster cleanup of blood and fluids
- Prevents contaminant build up in hard to clean areas
- Thermosealed seams and flaps
- · Recommended for trauma centers and sites concerned about exposure to blood and fluid-borne disease

Line	Qty.	Catalog	
18	1.00	E8016DC	Foot Slicker for CT Revolution

The GEHC Revolution CT Foot Switch slicker is specifically designed to maximize contaminant protection. Latex free, it is strongly suggested that the slicker is cleaned with a water/bleach solution prior to every procedure.

Line	Qty.	Catalog	
19	1.00	E4502BG	UL Main Disconnect Panel 380-480V 50/60Hz 175A for CT Rev2.0

NOTES:

· Customer is responsible for arranging for installation with a qualified party

• ITEM IS NON-RETURNABLE AND NON-REFUNDABLE

The MDP (Main Disconnect Panel) and UPS Control Panels serve as the main facility power disconnect source installed ahead of the Revolution CT system. On systems where the optional partial system UPS is included in the system, the panel provides NEC mandated UPS emergency power-off control function via a UPS control cable included with the UPS. The MDP saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, control power source and required indicator lights into a compact factory manufactured panel.

Applications For general installations of GE Revolution Apex[™].

Designed for reliability and easy installation

• The MDP saves time, installation labor, and valuable mounting space by consolidating the main circuit breaker, the feeder overcurrent devices, magnetic contactors and UPS emergency power-off into one compact panel

- The system provides stock availability of otherwise special-order devices, saving time and installation costs
- Reduces installation time and cost by eliminating delays in obtaining individually enclosed components and by eliminating on site assembly
- UPS emergency power-off functions are included for future, partial system UPS addition
- · Disconnects system power on first loss of incoming power, preventing damage to system components
- Provides a standardized platform for UPS or other future GE engineered modifications or upgrades

Built for investment protection

- UL, cUL listed
- Supplied with low voltage, cover mounted Push to Stop, Twist to Restore pushbutton and long life LED pilot lights
- Provides overcurrent and short circuit protection
- Suitable for use on systems with 25,000A of short circuit current. It is the installer's responsibility to verify that the available shout circuit current is 25,000A or less for compliance to all electrical codes.
- An optional partial system UPS provides clean uninterrupted power to the system computer, maintaining system integrity during power loss while also providing a solution to power quality problems.
- Emergency-off disconnects power to both the PDU and optional partial system UPS output, per National Electric Code

• Main power disconnect operating handle can be padlocked in the Off position for servicing safety and OSHA lock out/tag out

• The door has provisions for padlocking



September 14, 2022 Quote Number: 2008924543.3 Customer ID: 1-23I3PI Agreement Expiration Date: 11/13/2022

- Enclosure door is interlocked with On / Off disconnect handle to prevent unauthorized access if disconnect is in the On position
- Factory wired and tested
- Panel disconnect provides OSHA lockout / tag out provisions

• The main disconnect panel may be used as a stand-alone main disconnect, with the optional GE partial system UPS or with a GE full system UPS

Remote EPO (Emergency Power Off)

Includes two normally closed contact blocks attached to the back of the emergency off push button. Two are included with each MDP.

Line	Qty.	Catalog	
20	1.00	W0302CT	TIP CT Scanner 2 Training Program

This training program is designed for customers purchasing a GEHC CT system to include Revolution, Frontier, or HD. GEHC will work with the designated Customer contact to agree upon a reasonable training schedule for a pre-defined group of core technologists that will leverage blended content delivery and may include a combination of onsite days and virtual offerings, to include TiP Virtual Assist, the GEHC Answerline and available on-demand courses ("Virtual Inclusions"). This blended curriculum with multiple delivery platforms promotes learner retention and allows for an efficient and effective skill development.

This program may contain:

- Onsite training (generally 20 days)
- Virtual Inclusions may include:
- Remote instructor-led training: Instructor leads a remote training session one-on-one or in a group, typically for 1 hour

• Answerline Support-Access to GEHC experts for clinical, non-emergency applications assistance via phone or by using the iLinq button on the imaging console

Tip Virtual Assist-Direct interactive access to a GEHC expert for enhanced support.

• On Demand courses-On healthcare learning system. Self-paced courses and webinars (CE and non-CE). Training will be delivered at a mutually agreed upon time between the customer and GE Healthcare (excluding GE Healthcare holidays and weekends), are subject to availability and generally will not exceed 25 days. This training program has a term of twelve (12) months commencing on Acceptance, where all onsite training must be scheduled and completed within twelve (12) months of Acceptance and all Virtual Inclusions also expire at the end of such twelve (12) month period. Additional onsite days may be available for purchase separately.

All GEHC "Training" terms and conditions apply. Given the unique nature of this program, if this program is purchased as part of a purchase under a Governing Agreement, including any Master Purchase Agreement, Group Purchasing Organization Agreement, or Strategic Alliance Agreement, this program shall take precedence over any conflicting training deliverables set forth therein.

LineQty.Catalog211.00R21013ACStandard Service License

GE Healthcare has reclassified its service tools, diagnostics and documentation into various classes (please refer to the Service Licensing Notification statement at the beginning of this Quotation). The Standard License provides access to service tools used to perform basic level service on the Equipment and is included at no charge for the warranty period.



Subscriptions and other Term-Based Purchases

Summary of Term-Based Purchases		
Fee Type	Net Price Annual	Net Price Total
Non-recurring Fees		\$6,000.00
Recurring Fees	\$16,366.26	\$16,366.26
Subscription Total Contract Value		\$22,366.26

Non-recurring Fees:

Line	Qty.	Catalog	Description	
1	1	W0313ALL	Smart Subscription Clinical Education – 16 credits	
			-	Total Net Price

<u>otal Net Price</u> \$6,000.00

Ongoing clinical education is clinical education that extends beyond any training that occurs with the delivery of Equipment. Ongoing clinical education credits are designed to provide flexible training options to be used in promoting learner retention, supporting employee turnover needs and allows for efficient and effective skill development. Credits may be used by Customer employees for clinical education on GEHC diagnostic imaging products (MR, CT, Mammography, PET, Nuclear Medicine, Vascular and XR located at Customer's facilities and included in the Smart Subscription offering. Any unused credits existing at the end of the Smart Subscription Term are forfeited without refund or credit.

This program contains:

- Clinical Training credits – 16 credits per Smart Subscription Term.

- Answerline Support-Access to GEHC experts for clinical, non-emergency applications assistance via phone or by using the iLinq button on the imaging console

- Remote Training with a GEHC expert for enhanced support (1hour = 1 credit).

- On Demand courses-On healthcare learning system. Self-paced courses and webinars (CE and non-CE).

Credits may be used by Customer employees for trainings conducted at Customer's facility and via remote training sessions as follows:

• On-site training at Customer's facility = 8 credits per day (limited to 1 GE Healthcare trainer per visit)

· Remote training session = 1 credit per session per hour

This training program is non-discountable and has a term of twenty-four (24) months commencing on Acceptance, where all training must be scheduled and completed within twenty-four (24) months of Acceptance.

Any unused credits existing at the end of the Smart Subscription Term are forfeited without refund or credit. Additional credits may be available for purchase separately.

Recurring Fees:

Line	Qty.	Catalog	Description	Term/Duration(in Years)
1	1	B7931CH	Annual Fee for 1 Year Smart Subscription - Unlimited Edition	1.0
				<u>Total Net Price</u> \$14.878.42

Annual Fee for 1 Year Smart Subscription – Unlimited Edition Discount 0.00% Annual Payment \$50,000 Total List Price \$50,000

Provides access to the latest commercially available version of the Smart Subscription packages set forth in the Quotation (the "Software").

The initial term for this license subscription is 12 months, commencing upon Go Live (the date installation is complete) and will automatically renew for subsequent terms having the same duration as the initial term, unless otherwise agreed between the parties. However, either party may elect to not renew the subscription after the initial subscription term or any subsequent renewal period by providing at least 60 days written notice prior to the renewal date. Subscription renewal pricing is based on then current GE Healthcare pricing. Price increases will be communicated with at least 60 days prior written notice. Billing for the first 12 months of the subscription term and each subsequent term occurs in accordance with the billing term identified on the Quotation, with subsequent annual payments due on each anniversary thereafter. Subscriptions are not cancellable.

The quantity on the quote indicates the number of CT scanners covered by the subscription.



September 14, 2022 Quote Number: 2008924543.3 Customer ID: 1-23I3PI Agreement Expiration Date: 11/13/2022

Subscription licenses and installation services shall be deemed delivered as of the date of delivery of the equipment associated with the subscription.

As long as Customer has paid all currently due fees associated with Smart Subscription, GE Healthcare will provide, unless otherwise indicated and at no additional charge: (i) updates and/or upgrades to the Software when and if available and only if they are provided at no additional charge to all GE Healthcare customers with a subscription agreement for the Software; and (ii) support for Software-related issues that: (a) materially and adversely interfere with Customer's use of the Software and (b) result from a failure of the Software to materially conform to the Documentation. Support does not include the following, which will incur an additional charge: (1) updates or upgrades that are offered for an additional charge to all GE Healthcare customers with a support agreement; (2) fixes for issues that do not materially affect the Software; (3) training beyond that described in this Quotation; (4) interface modifications; (5) data migration or data conversion; (6) additional services; and (7) separately billable hardware, software or services.

Line	Qty.	Catalog	Description	Term/Duration(in Years)
2	1	B7931GS	Annual Fee Continuity Program Coverage	1.0
			for 1 Year	
				<u>Total Net Price</u>
				\$1,487.84

Annual Fee for 1 Year Continuity Program Coverage Discount 0.00% Annual Payment \$5,000 Total Price \$5,000

Continuity Program Coverage includes: Unlimited base system software upgrades and hardware upgrades if required to support such base system software upgrades, if and when such base system software and hardware upgrades are commercially available (amount includes \$4,500.00 Base System Software Upgrades and Required Hardware Upgrade fees); and commitment to have a supported OS (amount includes \$500.00 OS End of Life/Support fees). 36 months term commencing on date identified in the Quotation. No part of the Continuity Program Coverage price is refundable or subject to reduction.

Additional Continuity Program Coverage Terms and Conditions:

Base System Software Upgrades. During the Continuity Program Coverage Term (as defined below), GE Healthcare will provide (i) base system software upgrades for the Equipment that is identified on the Quotation as the Equipment to which Continuity Program Coverage applies, and (ii) hardware upgrades if such hardware upgrade is required to support the base system software upgrades, if and when such system software and hardware upgrades are commercially available. If any base system software upgrades require hardware beyond the hardware upgrade that may be provided under the Continuity Program Coverage, GE Healthcare has no obligation to provide such base system software upgrades until Customer has purchased the required hardware (e.g., equipment enclosure, custom cables). All product-related terms for upgrades (e.g., warranty, installation, late payment) are identified in the GE Healthcare Terms and Conditions and the Equipment Warranty Statement to which the Continuity Program Coverage upgrade applies. CONTINUITY PROGRAM COVERAGE DOES NOT PROVIDE ADDITIONAL EXPRESS OR IMPLIED WARRANTIES.

OS End of Life/Support. If the Equipment's operating system is no longer supported by the operating system's OEM during the Continuity Program Coverage Term, GE Healthcare will provide: (i) commercially available software updates and/or software upgrades that: (a) are required to ensure a supported operating system in the Equipment, and (b) have been validated by GE Healthcare to be compatible with the Equipment; and (ii) enabling hardware, if any, that is required for the Equipment to run the operating system, (collectively, "OS Updates, Upgrades and Enabling Hardware"). Installation of OS Updates, Upgrades and Enabling Hardware will be performed by GE Healthcare during the next scheduled Equipment planned maintenance service ("PM") if GE Healthcare is performing PM on the Equipment to which Continuity Program Coverage applies, or at a mutually agreed upon time.

Price and Payment. Pricing for the Continuity Program Coverage will be identified on the Quotation as a separate line item price. No part of the Continuity Program Coverage price is refundable or subject to reduction, and payments are not contingent on GE Healthcare's delivery, or Customer's acceptance, of any particular OS Updates, Upgrades and Enabling Hardware, base system software and/or hardware upgrade, or any other products or service under the Continuity Program Coverage.

Cost Reporting. Customer is aware of its cost reporting and accounting obligations required by any state or federal reimbursement health care program relating to the Continuity Program Coverage provided under this Quotation. Customer will review the Quotation to obtain the Continuity Program Coverage price and will request from GE Healthcare any additional information needed to fulfill Customer's cost reporting obligations.

Term and Termination. Continuity Program Coverage will start and end on the dates identified in the Quotation for the Equipment to which the Continuity Program Coverage applies ("Continuity Program Coverage Term"). In no event will the Continuity Program Coverage Term is non-cancelable. If the Equipment to which Continuity Program Coverage applies is sold or scrapped prior to the end of the Continuity Program Coverage Term, Customer is responsible for any remaining Continuity Program Coverage amounts due to GE Healthcare through the Continuity Program Coverage



September 14, 2022 Quote Number: 2008924543.3 Customer ID: 1-2313Pl Agreement Expiration Date: 11/13/2022

Term, and Customer will pay all remaining amounts within 30 days after termination or removal. Customer remains responsible for the Continuity Program Coverage price regardless of termination, expiration or any other event relating to this Quotation.

Exclusions. Except as identified above, Continuity Program Coverage excludes: (i) Product replacements; (ii) Product upgrades; (iii) accessories, supplies and consumable items; (iv) any Software; (v) advanced operating system applications or features; (vi) physicist testing and calibration; and (vii) training. Customer is not entitled to any remedy if GE Healthcare's failure to perform hereunder is due to: (a) Customer cancellation, rescheduling, or inability of GE Healthcare to access the Equipment; (b) Customer's default; (c) improper care of the Equipment; or (d) any cause beyond GE Healthcare's control. GE Healthcare is not responsible for providing system database maintenance for Customer, including but not limited to, activities related to backup, new users, user privileges, physician list updates, and archive/data entry.

Miscellaneous. Customer is responsible for: (i) site preparations, construction and rigging that may be required for Continuity Program Coverage; (ii) ensuring that all data is appropriately backed up prior to installation of OS Updates, Upgrades and Enabling Hardware; and (iii) purchasing any catch-up updates and/or upgrades needed for Continuity Program Coverage.

OS UPDATES, UPGRADES AND ENABLING HARDWARE PROVIDED UNDER THIS AGREEMENT ARE "AS IS" AND "AS AVAILABLE" WITH NO WARRANTY OF ANY KIND, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, WARRANTIES OF NON-INFRINGEMENT, MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. GE HEALTHCARE MAKES NO REPRESENTATIONS, WARRANTIES OR CONDITIONS THAT SUCH OS UPDATES, UPGRADES AND ENABLING HARDWARE, OR EQUIPMENT WILL BE UNINTERRUPTED, TIMELY, SECURE, ERROR-FREE OR MEET CUSTOMER REQUIREMENTS OR ANY NATIONAL GUIDELINE OR INDUSTRY STANDARD.

Equipment that is declared end of life/support by GE Healthcare is not eligible for Continuity Program Coverage. If Customer assigns this Agreement, all remaining Continuity Program Coverage payments become immediately due and payable by Customer on assignment.

Total Quote Subtotal:	\$1,200,000.00
Catalog+Subscription Initial Payment	\$1,200,000.00
Total Quote Net Selling Price:	\$1,200,000.00

If applicable, for more information on this devices' operating system, please visit GE Healthcare's product security portal at: <u>https://securityupdate.gehealthcare.com/en/products</u>



September 14, 2022 Quote Number: **2008924543.3** Customer ID: **1-23I3PI** Agreement Expiration Date: **11/13/2022**

GPO Agreement Reference Information

Customer:	Atrium Health Cleveland
Contract Number:	CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031
Billing Terms:	100% billing at Ship Completion (Fulfillment) / Delivery
Payment Terms:	Net Due in 60 Days
Shipping Terms	FOB DESTINATION

Offer subject to the Terms and Conditions of the applicable Group Purchasing Agreements currently in effect between GE Healthcare and CSS-GEHC MVA July 15 2011 a/k/a CSS-EQ-0031

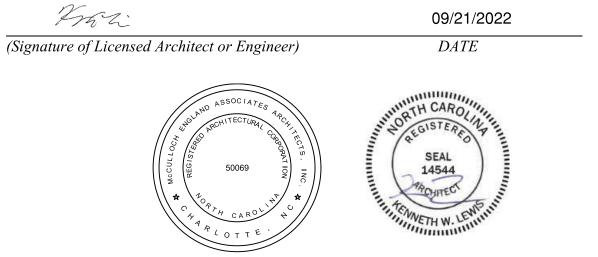
If applicable, for more information on this devices' operating system, please visit GE Healthcare's product security portal at: <u>https://securityupdate.gehealthcare.com/en/products</u>

Attachment D

PROPOSED TOTAI	CAPITAL COST	OF PROJECT
-----------------------	---------------------	-------------------

Project name:	Atrium Health Cleveland CT Replaceme	Atrium Health Cleveland CT Replacement			
Provider/Company:	Atrium Health	Atrium Health			
(1) Purchase price of	land	0			
(2) Closing costs		0			
0 Site Preparation		0			
(4) Construction/Reno	ovation Contract	1,417,325			
(5) Landscaping		0			
(6) Architect/Enginee	ring Fees	257,855			
(7) Medical Equipme	nt	1,287,000			
(8) Non Medical Equ	pment	0			
(9) Furniture		4,000			
(10) Consultant Fees (CON Fees, Legal Fees)	N/A			
(11) Financing Costs		N/A			
(12) Interest During Co	onstruction	N/A			
(13) Other (IS, Securit	y, Internal Allocation)	108,017			
(14) Total Capital Co	st	3,104,197			

I certify that, to the best of my knowledge, the above construction related costs of the proposed project named above are complete and correct.



Sales taxes have been included in these equipment costs. However, because Atrium Health is entitled to a sales tax refund under N.C. Gen. Stat. § 105-164.14(b) and 105-467, the sales tax that Atrium Health initially incurs for this medical equipment purchase will be refunded to Atrium Health, and thus will reduce the capital costs that Atrium Health actually incurs for the equipment by \$ 87,000.00

Attachment E

STATE OF I CAROLING

Department of Health and Human Services Division of Health Service Regulation

CERTIFICATE OF NEED for

Project Identification Number #C-8003-07 FID# 070813

ISSUED TO: Cleveland County HealthCare System 201 E. Grover Street Shelby, NC 28150

Pursuant to N.C. Gen. Stat. § 131E-175, et. seq., the North Carolina Department of Health and Human Services hereby authorizes the person or persons named above (the "certificate holder") to develop the certificate of need project identified above. The certificate holder shall develop the project in a manner consistent with the representations in the project application and with the conditions contained herein and shall make good faith efforts to meet the timetable contained herein. The certificate holder shall not exceed the maximum capital expenditure amount specified herein during the development of this project, except as provided by N.C. Gen. Stat. § 131E-176(16)e. The certificate holder shall not transfer or assign this certificate to any other person except as provided in N.C. Gen. Stat. § 131E-189(c). This certificate is valid only for the scope, physical location, and person(s) described herein. The Department may withdraw this certificate pursuant to N.C. Gen. Stat. § 131E-189 for any of the reasons provided in that law.

SCOPE: Relocate existing outpatient radiology services at Outpatient Radiology Center (ORCI), replace three x-ray units, replace an existing ultrasound unit, relocate an existing CT scanner from Cleveland Regional Medical Center to the new sitc leased by ORCI and acquire a new CT scanner to be located at Cleveland Regional Medical Center/ Cleveland County

CONDITIONS: See Reverse Side

PHYSICAL LOCATION:

Cleveland County HealthCare System 804 North Dekalb Street Shelby, NC-28150

MAXIMUM CAPITAL EXPENDITURE:

\$2,315,050

TIMETABLE: See Reverse Side

FIRST PROGRESS REPORT DUE: August 1, 2009

This certificate is effective as of the 8th day of April, 2009.

Chief. Certificate of Need Section **Division of Health Service Regulation**



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

Pat McCrory Governor

Aldona Z. Wos, M.D. Ambassador (Ret.) Secretary DHHS

> Drexdal Pratt Division Director

December 12, 2014

Gary S. Qualls PO Box 14210 Research Triangle Park, NC 27709-4210

Exempt from Review – Acquisition of Facility

Facility:	Cleveland Regional Medical Center
Type of Facility:	Acute Care Hospital
Acquisition by:	The Charlotte-Mecklenburg Hospital Authority
County:	Cleveland
FID #:	953106

Dear Mr. Qualls:

In response to your letters of November 5, 2014 and December 11, 2014, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(8). Therefore, The Charlotte-Mecklenburg Hospital Authority may proceed to acquire the above referenced health service facility without first obtaining a certificate of need. However, you need to contact the Acute and Home Care Licensure and Certification Section of the Division of Health Service Regulation to obtain instructions for changing ownership of the existing facility. Note that pursuant to G.S. 131E-181(b): "A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need."

It should be noted that this 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 Agency and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Juli Halatek

Julie Halatek Project Analyst

Martha (). Froone

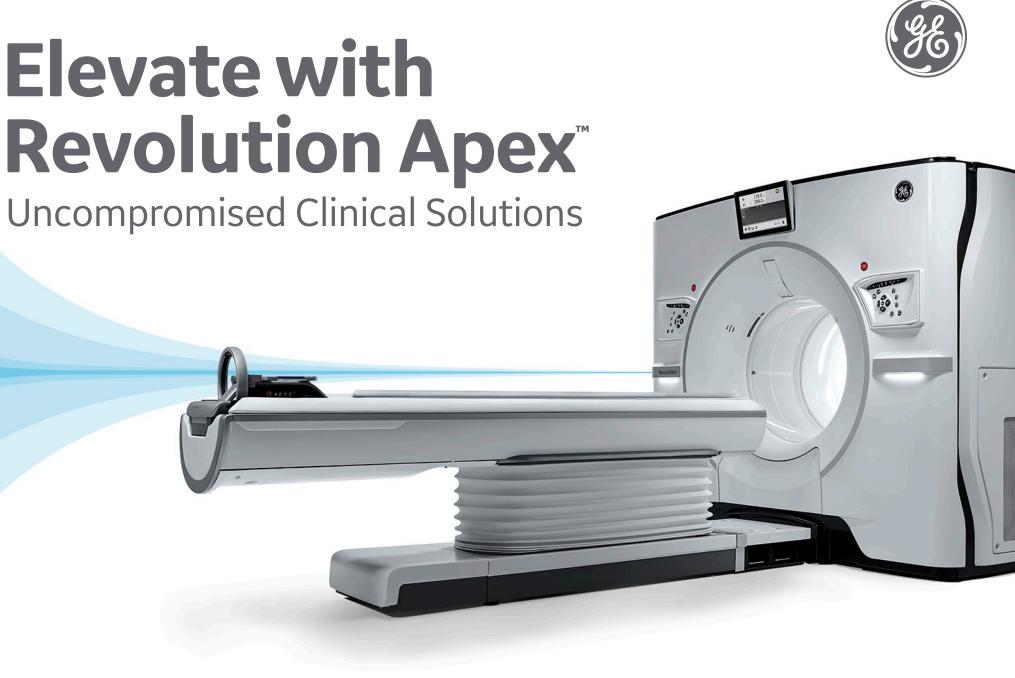
Martha J. Frisone, Interim Chief Certificate of Need Section

cc: Medical Facilities Planning Branch, DHSR Acute and Home Care Licensure and Certification Section, DHSR



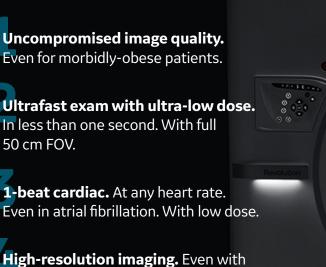
Certificate of Need Section www.ncdhhs.gov Telephone: 919-855-3873 • Fax: 919-733-8139 Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603 Mailing Address: 2704 Mail Service Center •Raleigh, NC 27699-2704 An Equal Opportunity/ Affirmative Action Employer

Attachment F



gehealthcare.com

Your best images for every patient



heavily calcified coronaries, plaque and stents.

CT TAVI/TAVR Planning. Single scan. Single injection. With low contrast volume.



Dynamic whole-heart perfusion imaging. Without shuttle. With low dose.

Acute stroke CT workup. In less than 5 minutes.

Pediatric imaging. Without sedation. Or Table Movement. With the lowest dose possible.

Metal artifact reduction. Both in single energy and dual energy.

Spectral Imaging. Even with larger patients. With speed.

Revolution Apex Elevating the capabilities of an uncompromised platform

Temporal

Power+ **Deep Learning** **Spatial**

Spectral

Coverage

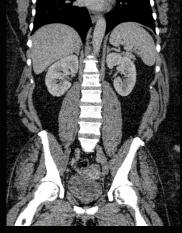
Abdominal imaging: Reconstruction technologies comparison

TrueFidelity on a BMI 62 patient (400 lbs, 1.73m)

Elevate with Revolution Apex

Uncompromised image quality. Even for morbidly-obese patients.

With Revolution Apex, every patient can have superior image quality. Even the most challenging ones. Using the many capabilities of the system, including the Quantix 160 Tube, 16 cm z-coverage Gemstone Clarity detector and TrueFidelity[™] Deep Learning Image Reconstruction, clinicals show uncompromised image quality, even for over-obese patients.



0.625 mm FBP



0.625 mm ASiR-V 50%

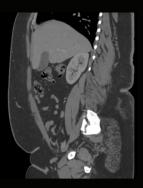


0.625 mm TrueFidelity image

Abdominal imaging TrueFidelity on a BMI 62 patient



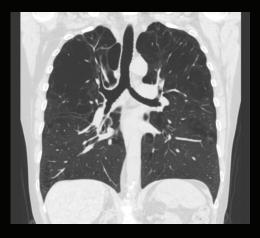




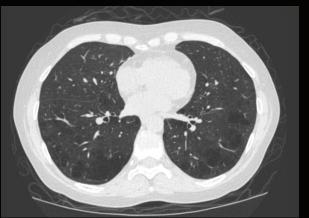
0.625 mm – TrueFidelity

0.6 mSv chest exam in less than 1 second with HyperDrive

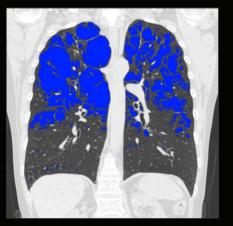
TrueFidelity images







Scan type: Helical Rotation time, s: 0.35 Pitch: 1.531 Slice, mm: 0.625 Scan length, mm: 331 Scan time, s: 0.9 kV: 120 mA: 55 DLP, mGy-cm: 45 Eff. dose, mSv: 0.6 k, *DLP: 0.014



Deep Learning Image Reconstruction

History: Tobacco use Follow up screening Findings: Stable solid <4 mm lingual node

Elevate with Revolution Apex

Ultrafast exam with ultra-low dose. In less than one second. With full 50 cm FOV.

Using HyperDrive, a 437 mm/s volumetric scan with 50 cm FOV and as low as 70 kV, Revolution Apex can acquire sub-second chest exams with ultra-low dose. Rely on TrueFidelity images for every exam, for the best image every time.

Elevate with Revolution Apex

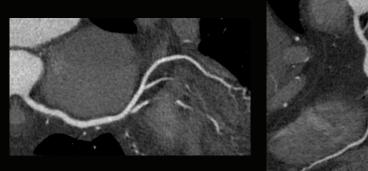
1-beat cardiac. At any heart rate. Even in atrial fibrillation. With low dose.

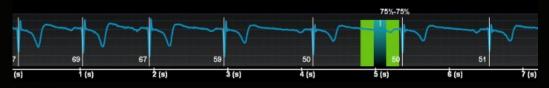
With a 16 cm detector, coverage is no issue for a whole heart acquisition making 1-beat cardiac at any heart rate, a reality. Tools like AutoGating, SmartPhase, Smart Arrhythmia Management and SnapShot Freeze 2 streamline and boost post processing for faster and more precise diagnosis.

1-beat CCTA @80kV on a patient with variable heart rate 84-100 BPM at low dose 1.7 mSv

TrueFidelity images







Scan type: Axial – 1-beat	CTDI vol, mGy: 121	Deep Learnir Reconstructi History: Chee Finding: No c
Rotation time, s: 0.28	DLP mGy x cm: 8.6	
BPM: 95	mSv (*0.014): 1.7	
BMI: 23	kV: 80	
Slice, mm: 0.625	mA: 1007	
Algorithm: Standard	CM (cc): 50	

ng Image

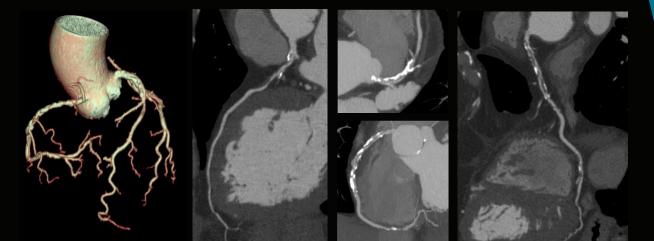
est pain coronary disease

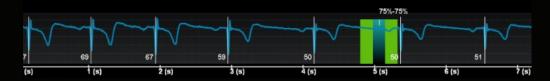
IMAGES COURTESY OF CENTRE CARDIOLOGIQUE DU NORD - St DENIS - FRANCE

TrueFidelity imaging. Even with heavily calcified coronaries.

1-beat CCTA with highly calcified coronaries

TrueFidelity





Scan type: Axial – 1-beat
Rotation time, s: 0.28
Acquisition: High Resolution
BPM: 50-69
BMI: 24
Slice, mm: 0.625

Algorithm: HD CTDI vol, mGy: 8.5 DLP mGy x cm: 119 mSv (*0.014): 1.67 kV: 100 mA: 580

CM (cc): 55

Deep Learning Image Reconstruction

History: Asymptomatic patient with risk factors and high calcium score (941)

Elevate with Revolution Apex

High-resolution imaging. Even with heavily calcified coronaries, plaque and stents.

With high-definition imaging, Revolution Apex has best in class spatial resolution for better vessel visualization and reduced calcium blooming. This provides clear images to help the physician with tasks such as accurately quantifying stenosis in coronaries and other vascular structures. This could lead to increased speed and confidence in reporting.

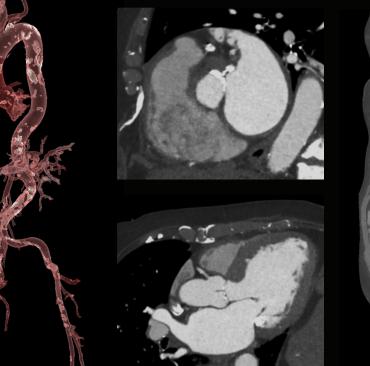
Elevate with Revolution Apex

CT TAVR/TAVI Planning. Single scan. Single injection. With low contrast volume.

Versatile TAVR/TAVI protocols allow acquisitions of the whole heart with gating, and aorta and femoral arteries with the use of just a single injection of contrast media. This covers 700 mm of anatomy in less than 10 seconds. Paired with the reliable, low kV scan, it even further optimizes the injected contrast volume by boosting contrast visualization.

CT TAVR Planning. Single scan. Single injection. With low contrast volume.

TrueFidelity





Scan type: Gated Axial/Helical Rotation time, s: 0.35/0.6 Pitch: 0.992 BMI: 26 Slice, mm: 0.625 Scan length, mm: 633.5 Scan time, s: 2.7 kV: 70 mA: 696-1249 Noise index: 33.7/10 Contrast: ml: 67 mgl/ml: 350 CTDlvol, mGy: 14.8/10.5 DLP, mGY-cm: 778.5

k, *DLP: 00.014

Deep Learning Image Reconstruction

History: Evaluation of aortic value stenosis

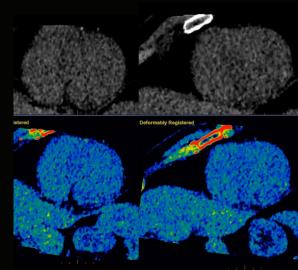
Findings: Annulus with moderate calcification. No focal narrowing of the iliofemoral arteries

IMAGES COURTESY OF FROEDTERT & MEDICAL COLLEGE OF WISCONSIN, USA

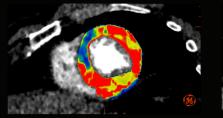
Dynamic whole-heart perfusion imaging. Without shuttle. With low dose.

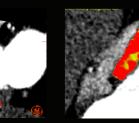


Rest CCTA



Stress dynamic perfusion: Automatic registration between passes





Quantitative maps - Mean Blood Flow

Stress D		Daufuraia
STRESS DA	V 12 1 1 1 (C	
00000	ynanne	

Scan type: Gated Axial (70% R-R) Rotation time, s: 0.28 Slice, mm: 1.25 Scan length, mm: 140 Number of passes: 9/10/6 Interval between passes, s: 1.8/0.8/2.8 Scan time, s: 17/9/17 kV: 100 mA: 100 Contrast: ml: 50 mgl/ml: 320 DLP, mGy-cm: 364 mSv (*0.014): 5.1

History: 70+ y/o patient, risk factors: former smoker, hypertension, diabetes, dyslipidemia

No angina. Dispnea. SPECT positive in inferolateral wall

Elevate with Revolution Apex

Dynamic whole-heart perfusion. Without shuttle. With low dose.

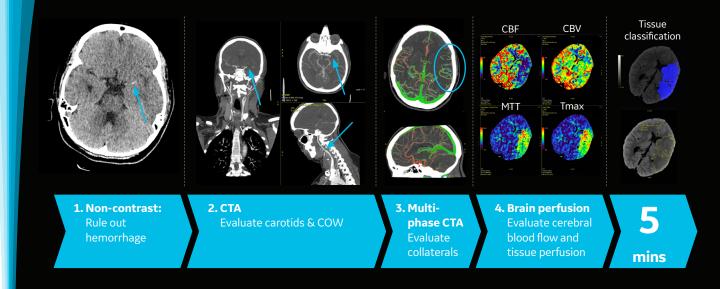
Revolution Apex, combining 16 cm wide coverage and 29 ms temporal resolution, enables whole-heart dynamic perfusion acquisition, without the need to shuttle the table. This enables an accurate whole-heart perfusion with uniform contrast and provides physicians both anatomical and functional information of obstructive CAD.

Elevate with Revolution Apex

Acute stroke CT workup. In less than 5 minutes.

Time is brain. Stroke-dedicated hardware, Smart Stroke software and post-processing solutions built into Revolution Apex can help physicians reduce "CT scan-to-report" time and "door-to-treatment" time. Save more of your stroke patients' brain tissue with our pioneering capabilities.

Acute stroke CT workup. Less than 5 minutes.



IMAGES COURTESY OF UZ BRUSSELS, BELGIUM

Pediatric imaging. Without sedation. 3yo CTA Chest Aortic Stenosis 117bpm

TrueFidelity images











Scan type: Gated Axial Rotation time, s: 0.28 Slice, mm: 0.625 Scan length, mm: 160 Scan time, s: 0.28 kV: 70

mA: 383

Noise index: 27

Contrast: ml: 13 mgl/ml: 350

CTDlvol, mGy: 1.3

DLP, mGy-cm: 21.5

Deep Learning Image Reconstruction

Findings: Supravalvular aortic stenosis. Ground glass opacities in right middle lobe

Elevate with Revolution Apex

Pediatric imaging. Without sedation. With the lowest dose possible.

Revolution Apex's split-second volumetric scanning can potentially reduce the need for sedation and eliminate unnecessary repetition of scans in young children due to failed sedation. TrueFidelity images and 70 kV scans allow you to minimize the radiation dose while improving image quality and diagnostic confidence.

IMAGES COURTESY OF FROEDTERT & MEDICAL COLLEGE OF WISCONSIN, USA

Elevate with Revolution Apex

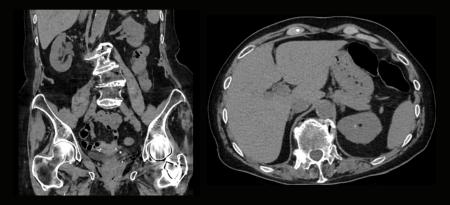
Metal artifact reduction. Both in single and dual energy.

No matter your acquisition, trust in metal artifact reduction to take care of the otherwise challenging dense objects in your patients. Revolution Apex's dedicated single energy and dual energy MAR solutions can reveal anatomic and pathological details obscured by metal artifacts in the body caused by hip implants, surgical clips, endovascular coils, dental fillings, etc.

Renal stone protocol using HyperDrive & SmartMAR



0.625 mm Standard ASiR-V 50 %



0.625 mm Standard TrueFidelity images with Smart MAR

Scan type: Helical Rotation time, s: 0.35 Pitch: 1.531 BMI: 24

Slice, mm: 0.625 Primary recon, mm: 2.5 Scan length, mm: 370 Scan time, s: 1 kV: 140 mA: 215-382 Noise index: 11.4 Reconstruction: TrueFidelity CTDIvol, mGy: 6.7 DLP, mGy-cm: 315 Eff. dose, mSv: 4.7

k, *DLP: 0.015

Deep Learning Image Reconstruction

History: 79 year old female with recurrent renal infection

Findings: Left upper pole calcification measuring 2 mm

IMAGES COURTESY OF FROEDTERT & MEDICAL COLLEGE OF WISCONSIN, USA



Spectral Imaging. Even with larger patients.

Elevate with Revolution Apex

Spectral Imaging. Even with larger patients. With speed.

The vision behind GSI Xtream has never wavered – a volume spectral imaging experience to help physicians diagnose disease with more confidence with a simplified workflow. Empowered by the Quantix 160 Tube, GSI Xtream on Revolution Apex takes that idea to the next level to enable spectral imaging on more challenging patients without the compromise on image quality and quantification accuracy. See the bigger picture with volume spectral CT.



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Not for sale in all regions.

May 2019 JB66934XX

Attachment G

EQUIPMENT COMPARISON – AH Cleveland CT Scanner Replacement

	EXISTING EQUIPMENT	REPLACEMENT EQUIPMENT
Type (e.g., Cardiac Catheterization, Gamma Knife®, Heart-lung bypass machine, Linear Accelerator, Lithotriptor, MRI, PET, Simulator, CT Scanner, etc.)	CT Scanner	CT Scanner
Manufacturer	GE	GE
Model name/number	VCT 64	Revolution Apex
Other method of identifying the equipment (e.g., Serial Number, VIN #)	441215CN1	Not Available Until Installed
Is the equipment mobile or fixed?	Fixed	Fixed
Date of acquisition	2010	2022
Was the existing equipment new or used when acquired? / Is the replacement equipment new or used?	New	New
Total projected capital cost of the project	NA	\$3,104,197
Total cost of the equipment	Not available due to system transition	\$1,287,000
Location of the equipment	AH Cleveland Room CT A	AH Cleveland Room CT A
Document that the existing equipment is currently in use	12,851 scans were performed from August 2021 to July 2022	NA
Will the replacement equipment result in any increase in the average charge per procedure ?	NA	No
If so, provide the increase as a percent of the current average charge per procedure	NA	NA
Will the replacement equipment result in any increase in the average operating expense per procedure ?	NA	No
If so, provide the increase as a percent of the current average operating expense per procedure	NA	NA
Type of procedures performed on the existing equipment	All primary CT applications	NA
Type of procedures the replacement equipment will perform	NA	All primary CT applications

Attachment H

AH Cleveland GE VCT 64 CT Scanner		
Volume by Month		
Month	Volume	
Aug-21	1,131	
Sep-21	1,010	
Oct-21	1,081	
Nov-21	1,100	
Dec-21	1,064	
Jan-22	1,032	
Feb-22	1,034	
Mar-22	1,177	
Apr-22	1,056	
May-22	1,106	
Jun-22	992	
Jul-22	1,070	
Total	12,851	

Attachment I

<u>md</u> buyline

Charlotte Mecklenburg Hospital Authority dba Atrium Health

Charlotte, NC

Vendor:	GE HEALTHCARE	
Requested By:	Courtney Dobbelaer	
Quote Number:	FMV - GE VCT 64	
Quote Date:	Not Provided	
Tracking ID:	1863894	
Analysis Date:	3/16/2022	

Analyst Commentary Insight Review

Thank you for submitting your information. You have requested fair market value for your GE VCT 64 CT system. The information for the device needed:

Model Number: GE LightSpeed VCT 64 slice

Manufacturer: GE Healthcare

Purchase Date: 12/2010

Purchase Price: Unknown

Based on historical data, the purchase price for a brand new GE VCT 64 system, which is now obsolete, was between \$1 million to \$1.5 million between 2007 to 2008. Over the last 12 months, symplr has seen GE offer \$40k to \$50k for this system as a trade-in credit. Without knowing the exact purchase price for your system I have used the figures previously mentioned and calculated an approximate value between \$100k to \$150k as high end. Considering the age of your equipment, I would say your system has a value in the lower price range. As a reference, a completely refurbished GE CT can be currently be purchased for approximately \$450k.

symplr does not provide formal Fair Market Value (FMV) equipment assessments. However, we have a fairly standardized calculator that will project rough FMV numbers based on straight-line depreciation over the useful life as defined by the American Hospital Association (AHA) guideline (last tab on the calculator). Note: the most recent publication of the AHA guidelines is 2018 as equipment life cycle estimates do not typically change over time.

Below are the key pieces of information you need to use the calculator effectively:

- Original Purchase Price (Internal PO)
- Age / year put into service (Internal PO)
- Typical Life Expectancy (tab on calculator showing AHA guidelines)

• Annual depreciation (we use 10% per year, you may want to confer with your CFO on your internal rate of depreciation)

Once those values are entered along with your starting price, the calculator automatically generates the declining FMV from point of purchase on an annual basis until the final year of the life expectancy. This progression is shown in the Values Tab. You can make note of the FMV based on your starting year and counting down to the current year. If the current year is further out than the life expectancy, then your item effectively has a salvage value of around 10% of the original purchase price. Once you have determined the FMV of that item, you can simply clear out the calculator values and use it over and over.

With the above information, you can estimate the FMV on virtually anything. We often get involved on high-tech medical equipment because technological advancements and other market forces may impact the true FMV beyond the typical parameters, but all other technology can be fairly reasonably estimated with this calculator.

Keep in mind, this is only a very rough estimate and cannot take into account condition, utilization, or service history.

Questions?

Contact: Kaitlyn Wilkie, Associate Analyst Kaitlyn.Wilkie@mdbuyline.com 800-375-5463 ext. 1453

For International customers, please contact MD Buyline using the e-mail address indicated above.



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From:	Huber, Brighid K
То:	<u>Lightbourne, Ena; Hunt, Tiffany C; Waller, Martha K</u>
Cc:	Kirkman, Elizabeth
Subject:	[External] Exemption Request for The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health Cleveland
Date:	Friday, September 30, 2022 4:50:49 PM
Attachments:	2022 CMHA dba AH Cleveland CT Replacement Exemption Request.pdf

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to <u>Report Spam.</u>

Good afternoon,

I hope this email finds you well. Please find attached an exemption request submitted by The Charlotte-Mecklenburg Hospital Authority ("CMHA") d/b/a Atrium Health Cleveland ("AH Cleveland") to replace a CT scanner located in the main hospital building.

Thank you very much, and please let me know if you have any questions.

Best,

Brighid

Brighid Knoll Huber, MHA, ATC Strategic Services Group Mobile: 724-986-6214

Atrium Health

Carolinas HealthCare System is Atrium Health

2709 Water Ridge Parkway, Suite 200, Charlotte, NC 28217

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