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**HEALTH FACILITIES COMMISSION**  
**MARCH 25, 2026**  
**APPLICATION REVIEW**

NAME OF PROJECT: Covenant Health Diagnostics Blount County ODC

PROJECT NUMBER: CN2601-001

ADDRESS: An unaddressed site located between Tesla Blvd. and Highway 129 adjacent to parcel 1440 Tesla Blvd Alcoa (Blount County), Tennessee 37701

LEGAL OWNER: Covenant Health Diagnostic Centers, LLC  
1400 Centerpoint Blvd., Suite 100, Bldg. A  
Knoxville (Knox County), TN 37932

OPERATING ENTITY: N/A

CONTACT PERSON: Travis Swearingen, Attorney  
(202) 389-5000

DATE FILED: January 30, 2026

PROJECT COST: \$12,733,007

PURPOSE FOR FILING: The establishment of an Outpatient Diagnostic Center ("ODC")

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## **Staff Review**

*Note to Commission members: This staff review is an analysis of the statutory criteria of Need, Consumer Advantage Attributed to Competition, and Quality Standards, including data verification of the original application and, if applicable, supplemental responses submitted by the applicant. Any Health Facilities Commission (HFC) Staff comments will be presented as a "Note to Commission members" in bold italic.*

### **PROJECT DESCRIPTION**

The applicant is seeking approval for the establishment of an outpatient diagnostic center (ODC) at an unaddressed site between Tesla Boulevard and Highway #129 adjacent to the parcel located at 1440 Tesla Blvd, Alcoa (Blount County), Tennessee 37701.

### Executive Summary

- If approved, the applicant projects the proposed project will open for service in January 2028.
- The applicant will establish a new freestanding outpatient diagnostic center (ODC) offering a range of imaging modalities including a 1.5T MRI unit, CT, X-ray, bone density, mammography, and ultrasound.
- The applicant does not have any affiliation with existing imaging providers in Blount County.
- There are no licensed outpatient diagnostic centers located in Blount County, Tennessee. The applicant's owner - Covenant Health operates two ODCs equipped with MRI units in Knox County - Covenant Health Diagnostics West - 17.7 miles and 25 minutes - from Maryville (Blount County), and Covenant Health Diagnostics South - 17.2 miles and 25 minutes from Maryville.
- The proposed ODC will be co-located with a newly developed Covenant Health medical park in the Springbrook area of Alcoa (Blount County), which will include medical clinics, supporting and integrated care environment.
- The applicant states that the ODC will continue Covenant Health's efforts to expand access to lower cost, patient centered care in outpatient settings while complementing its existing health care system's hospitals, and affiliated physician practices.
- The applicant states that the proposed facility will be available to all referral sources in Blount County including fifteen primary care practices and urgent care centers, as well as a recently opened Tennessee Orthopaedic Alliance Clinic near the proposed ODC site.
- The applicant states that the ODC will be located in a geographically accessible location and will represent a more convenient, efficient and affordable option for residents of the service area. The ODC will be located 4.4 miles from the only hospital in Blount County - Blount Memorial Hospital, which is not affiliated with the applicant. The closest ODC facilities in Knox County affiliated with the applicant Covenant Health - West, and Covenant Health - South, are 17.8 miles and 18.6 miles from Blount Memorial Hospital respectively.
- A total of 6,051 Blount County residents were served in Knox County ODC facilities in 2024. Of those, 1,078 (17.8%) were served in Covenant Health ODCs.
- Please see application Item 1E. on Pages 6 & 7 for the applicant's executive summary overview that includes project description, ownership, service area, existing similar service providers, project cost, and staffing.

**Consent Calendar:**             Yes             No

- Executive Director's Consent Memo Attached:  Yes             Not applicable

### **Facility Information**

- The ODC project will be located within leased office space of a newly constructed medical office building. The initial 10-year option to lease between the landlord – Covenant Health, and the lessee – Covenant Health Diagnostic Centers, LLC is included as Attachment 9A.
- The ODC will occupy approximately 10,000 square feet and will include a Radiology Reading Suite, MRI, CT, Stress/Echo, Bone Densitometry, Ultrasound, and Mammography imaging suites, a diagnostic waiting room, dressing rooms, MRI screening and control rooms, and other ancillary spaces. The Floor Plan is included as Attachment 10A.
- The facility will be located adjacent to Highway 129 in Alcoa which is the primary north / south corridor linking Knoxville, Alcoa and Maryville, as well as US Route 321 which is the primary east /west corridor through Blount County. Public transportation to the proposed site is available through Blount County Public Transportation System (BCPTS), but the applicant expects most patients to arrive by private vehicles.

### **Ownership**

- The applicant will be operated by Covenant Health Diagnostic Centers, LLC – a Tennessee Limited Liability Company which is owned (100%) by Covenant Medical Group, Inc. (“CMG”). CMG is a wholly-owned subsidiary of Covenant Health through Fortress Corporation (another wholly-owned subsidiary of Covenant Health).

### **Project Cost Chart**

- The total project cost is \$12,733,007. Of this amount, the highest line-item costs of the project are Facility Lease Costs, which include construction development costs (\$8,047,602), Moveable Equipment Costs (\$4,356,820), and Furnishing Costs (\$300,000).
- For additional information, please see Project Costs Chart on page 11 of the application.

### **NEED**

The applicant provided the following supporting the need for the proposed project:

- There are no licensed ODCs in Blount County, limiting the number of affordable imaging facilities accessible by all residents.
- The two MRI units currently operating in Blount County are either hospital-based or physicians practice based at Blount Memorial Medical Center and East Tennessee Medical Group physician office. The applicant states that the proposed

**COVENANT HEALTH DIAGNOSTICS BLOUNT COUNTY ODC**

**CN2601-001**

**MARCH 25, 2026**

**PAGE | 3**

ODC will result in cost savings compared to these existing facilities and increased access for service area residents.

- The applicant cites the projected population and economic growth in Blount County as supporting increased future demand.
- Both existing MRI units in the service area report high volumes of patients. The addition of an ODC to county will help decompress MRI and other imaging volumes in the local hospital, shifting appropriate outpatient imaging procedures to a more efficient setting and allowing hospital imaging to focus on higher-acuity patients.
- The proposed facility will increase affordability, address the geographic isolation of the service area, reduce travel time for patients, and improve the efficiency of imaging services in Blount County.

*(For applicant discussion, see Item 2.E., Pages 8 & 9)*

## **SERVICE SPECIFIC CRITERIA AND STANDARD REVIEW**

### **Outpatient Diagnostic Center Criteria**

All applicable criteria and standards appear to be met.

*Please see Attachment 1N for a full listing of the criteria and standards and the applicant's responses.*

### **Service Area Demographics**

- The proposed primary service area will consist of Blount County, Tennessee (*see Attachment 2N for a county level maps*).
- The target population is the population aged 20 and older for the service area. (*See Attachment 3NBR for more demographic details.*)

County	2026 Population	2030 Population	% Change 2026-2030	2026 Population 20+	2030 Population 20+	% Change 20+ 2026-2030	Median Household Income	% Persons Below Poverty Level	TennCare %
Blount County	145,681	150,249	3.1%	114,345	118,067	3.3%	\$77,365	9.2%	14.0%
<b>Tennessee Total</b>	<b>7,300,003</b>	<b>7,513,757</b>	<b>2.9%</b>	<b>5,541,590</b>	<b>5,705,973</b>	<b>3.0%</b>	<b>\$69,595</b>	<b>13.5%</b>	<b>19.1%</b>

*Source: The University of Tennessee Center for Business and Economic Research Population Projection Data Files, Reassembled by the Tennessee Department of Health, Division of Policy, Planning and Assessment, Office of Health Statistics.*

- The service area target population (20+) is projected to grow at a faster rate (3.3%) than the State of Tennessee as a whole (3.0%) from 2026-2030.
- The percentage of individuals enrolled in TennCare is lower in Blount County (14.0%) than the State of Tennessee (19.1%).

- Approximately (13.4%) of residents in Blount County between the ages of 19 – 65 do not have health insurance. The applicant states that these uninsured residents will have access to a more affordable imaging provider in the proposed ODC.

**Service Area- Historical Utilization (MRI)**

There are no Outpatient Diagnostic Centers in the applicant’s proposed service area. Utilization for the (2) MRI units in the project service area is detailed in the table below:

County	Provider Type	Provider	# Units	Fixed/ Mobile	2022	2023	2024	2024 Avg. Procedures per Unit
Blount	HOSP	Blount Memorial Hospital	1	Fixed	5,950	6,396	6,468	6,468
Blount	PO	East Tennessee Medical Group	1	Fixed	4,164	4,677	4,248	4,248
<b>TOTAL</b>			<b>2</b>		<b>10,114</b>	<b>11,073</b>	<b>10,716</b>	<b>5,358</b>

Source: CN2601-001, Application, Page 13

- The two existing facilities operating MRI units in the service area report performing a combined 10,716 MRI procedures in 2024.
- Blount Memorial Hospital reported performing 6,468 MRI procedures in 2024 and increase of (8.7%) from 2022.

**Applicant’s Historical and Projected Utilization**

There is no historical utilization for the applicant in Blount County. The applicant’s projected number of imaging procedures by county of patient origin and by procedure type is detailed in the following tables:

**Projected Utilization by County of Patient Origin (Year 1 – 2028)**

Service Area Counties	Projected Utilization Year 1 (2028)	% of Total
Blount	11,812	95.0%
Other TN Counties	622	5.0%
<b>Total</b>	<b>12,434</b>	<b>100.0%</b>

Source: CN2601-001, Application, Page 13

- The majority of ODC procedures are projected to be residents of Blount County (95.0%).

**Projected Utilization of Applicant’s MRI, CT, X-Ray, Ultrasound and Mammography Imaging Services (Year 1 – 2028 and Year 2 – 2029)**

Imaging Modality	Year 1 (2028)	Year 2 (2029)	% Change from Year 1 to Year 2
MRI	2,393	2,766	15.6%
CT	2,018	3,304	63.7%
X-Ray	3,520	5,884	67.2%
Ultrasound	1,827	2,776	51.9%
Mammography	2,676	4,002	49.6%
<b>Total Procedures</b>	<b>12,434</b>	<b>18,733</b>	<b>50.7%</b>

Source: CN2601-001, Application, Attachment 6N

- If the proposed ODC is approved, it is projected to perform 12,434 total imaging procedures in Year 1 – 2029 increasing by (50.7%) by Year 2 – 2029 to (2,640) total procedures
- The volume of X-Ray and CT procedures is expected to increase by the highest percentage from Year 1 to Year 2.
- The applicant states that its utilization projections are based on analysis of the historic and projected imaging utilization in Blount County as well as historical utilization of its affiliated ODCs in the region.

**CONSUMER ADVANTAGE ATTRIBUTED TO COMPETITION**

- The applicant states that the proposed ODC will expand consumer choice and access to high-quality, lower cost imaging services for residents of Blount County.
- The presence of a licensed ODC, as opposed to a physician’s office-based imaging service, will ensure that the facility is open to all residents of the service area.
- The facility will ensure greater scheduling flexibility, and shorter wait times for service area patients.
- The applicant states that the proposed ODC will help decompress volumes at existing imaging units operating in the service area.

**Charges**

In Year One (2028) and Year Two (2029) of the proposed project, the average charges are as follows:

	<b>Year 1 (2028)</b>	<b>Year 2 (2029)</b>
Gross Charges	\$345	\$331
Deduction from Revenue	\$183	\$175
Average Net Charges	\$162	\$156

Source: CN2601-001, Application, Page 21

- The applicant projects that its Average Net Charges will decrease from \$162 per procedure in 2028 to \$156 per procedure in Year 2 (2029).

**Gross Charge Comparisons with Service Area MRI Providers 2024**

Covenant Blount County ODC	\$345.05
Blount Memorial Hospital	\$6,601.90
East Tennessee Medical Group	\$3,763.22

Source: CN2601-001, Supplemental #2, Page 1

- The projected gross charges per MRI procedure for the applicant (\$345.05) are lower than the historical gross charges reported by the two other MRI operators in Blount County in 2024.

### Gross Charge Comparisons with Service Area CT Providers 2024

Covenant Blount County ODC	\$385.78
Blount Memorial Hospital	\$6,737.27
East Tennessee Medical Group	\$11,226.80
Allergy, Asthma and Sinus Center	\$580.60

Source: CN2601-001, Supplemental #1, Page 6

- The applicant's average proposed charge per CT procedure is \$385.78. The only comparable charges are reported by Allergy, Asthma and Sinus Center which the applicant states are likely restricted to patients of the practice and offered for limited ENT-related purposes.

### Project Payor Mix

The proposed project payor mix for Year One is as follows:

	Percentage of Gross Operating Revenue					
	Medicare	Medicaid	Commercial	Self-Pay	Other	Charity Care
<b>Year 1</b>	18.5%	5.4%	64.7%	6.1%	5.3%	1.0%

Source: CN2601-001, Application, Page 22

- The applicant will participate in Medicare and Medicaid, including contracting with all TennCare MCOs in the region.
- The applicant projects that the majority of revenue will be from Commercial Payors (64.7%). The applicant states that this percentage of Commercial Payors is consistent with its other affiliate ODCs.
- The applicant states that the project will be accessible to insured, uninsured, and underinsured patients. A higher percentage of revenue of projected to be from Self-Pay (6.1%) than Medicaid (5.4%).
- The applicant projects a (1.0%) Charity Care rate for the ODC.
- Please refer to Item 10C. in the Consumer Advantage section of the application for specific Payor Mix information.

*Note to Commission members: The applicant provides the following information about its projected Commercial Payor Mix: "Blount County is an extension of the Knoxville MSA, with several large employers offering commercial insurance plans. Since freestanding imaging centers provide convenience, efficiency, and lower cost, ODCs typically align with the needs and preferences of commercially insured working patients under employer-sponsored plans. Moreover, commercial insurers will often steer patients to freestanding imaging services over hospital-based provider because of lower cost, which contributes to a higher commercial percentage in the ODC's projected payor mix." See Supplemental #1, Question #11, Page 7.*

### Agreements

- The applicant states that it will have transfer agreements with Blount Memorial and Covenant's hospitals in Knoxville.

### Staffing

The applicant's Year One proposed staffing includes the following:

	Year One
Direct Patient Care Positions	6.5
Non-Patient Care Positions	4.0
Contractual Staff	0.0
<b>Total</b>	<b>10.5</b>

Source: CN2601-001, Application, Page 26

- Direct Care positions include the following: Mammography Technologists (2.0 FTE); MRI Technologists (1.5 FTE); X-Ray Technologist (1.0 FTE); CT Technologist (1.0 FTE); and Ultrasound Technologist (1.0 FTE).
- Non-Patient Care positions include the following: Registration (1.0 FTE).
- The applicant states that many of the staff needed to support the operation of the ODC are already employed by Covenant Health and working with other affiliated outpatient imaging sites in the region.
- The applicant states that its affiliate ODC facilities are fully staffed and that it has hundreds of imaging technologists employed throughout its system.
- Please refer to Item 8Q. on page 26 of the application for additional details regarding project staffing.

### QUALITY STANDARDS

The applicant commits to obtaining the following:

Licensure	Certification	Accreditation
Health Facilities Commission	Medicare/TennCare	American College of Radiology (ACR)

Source: CN2601-001, Application, Page 24.

- The applicant will pursue licensure through the Health Facilities Commission as an Outpatient Diagnostic Center.
- The ODC will pursue certification through Medicare and TennCare. It will pursue accreditation for its imaging services through the American College of Radiology (ACR).
- The applicant states that all procedures will be performed under the direction and clinical oversight of credentialed and experienced physicians and clinical leaders affiliated with Covenant Health.

**COVENANT HEALTH DIAGNOSTICS BLOUNT COUNTY ODC**

**CN2601-001**

**MARCH 25, 2026**

**PAGE | 8**

- The facility will operate under the same policies, procedures and clinical protocols utilized by existing imaging operations of Covenant Health affiliates.
- Vista Radiology, an independent radiology practice of board-certified radiologists, will provide physician supervision for the ODC.
- The applicant addresses a settlement with the DOJ involving allegations of violations of the Americans with Disabilities Act (ADA) in response to Item 7Q. See Supplemental 1, Question 12, Page 7.

**Application Comments**

Application Comments may be filed by the Department of Health, Department of Mental Health, and Substance Abuse Services, and the Department of Disability and Aging. The following department(s) filed comments with the Commission and are attached:

- Department of Health
- Department of Mental Health and Substance Abuse Services
- Department of Disability and Aging
- No comments were filed.**

**CERTIFICATE OF NEED INFORMATION FOR THE APPLICANT:**

There are no other letters of intent, pending applications, denied applications, or outstanding Certificates of Need on file for this applicant.

**CERTIFICATE OF NEED INFORMATION FOR OTHER SERVICE AREA FACILITIES:**

There are no other Letters of Intent, Outstanding or Denied applications on file for other entities proposing this type of service.

Pending Applications

<b>Project Name</b>	<b>Prisma Health Imaging Centers, CN2603-</b>
<b>Project Cost</b>	<b>\$7,007,732</b>
<b>Meeting Date</b>	April 22, 2026
<b>Description</b>	An outpatient diagnostic center in Blount County, Tennessee, offering various imaging services, including MRI, CT, X-Ray, Ultrasound, and Mammography. The address of the project will be an unaddressed site located on Hwy 411, adjacent to 2409 and 2441 Hwy 411, Maryville, Blount County, Tennessee, 37801.

TPP (3/15/2026)

# **CRITERIA AND** **STANDARDS**

**Attachment 1N.A – Standards  
and Criteria for Outpatient  
Diagnostic Centers**

## OUTPATIENT DIAGNOSTIC CENTERS

- 1. The need for outpatient diagnostic services shall be determined on a county by county basis (with data presented for contiguous counties for comparative purposes) and should be projected four years into the future using available population figures.**

Response: The proposed ODC will be located in Alcoa, Tennessee, and will serve patients residing in Blount County. The need for the proposed ODC, as well as supporting utilization data, is demonstrated in the accompanying analyses provided in Attachment 1N.B. Population projections were developed for a four-year period (2024–2028) based on the most recent Boyd Center population forecasts. Utilization projections were developed using historic and projected use of imaging services by Blount County residents combined with Covenant Health’s experience in operating ODCs in the region. These data show a clear and growing need for expanded outpatient imaging capacity within Blount County.

Blount County currently has no freestanding ODCs. Existing MRI capacity is limited to one hospital-based unit and a physician office-based unit that is operated as an outpatient department of the local hospital, both of which are highly utilized and not sufficient to meet the area’s growing outpatient demand. Average MRI utilization within the county far exceeds the state’s minimum threshold of 2,880 procedures per unit per year, demonstrating a clear capacity constraint and justifying the addition of a freestanding outpatient unit.

The proposed ODC is needed to better serve the community by expanding access to state-of-the-art imaging technology and services in a setting that is convenient, efficient, and affordable. The ODC model aligns with national and state healthcare trends emphasizing the migration of appropriate services from hospital-based to lower-cost outpatient settings. This approach will allow Covenant Health to meet increasing patient demand while helping to control healthcare costs for consumers, payers, and employers.

The project site in Alcoa is strategically located near major transportation corridors, including U.S. Highway 129 and U.S. Route 321, providing convenient access for patients who live or work throughout Blount County. The proposed ODC will enhance geographic accessibility, offering a new option for patients seeking timely, high-quality diagnostic imaging close to home. By shifting appropriate outpatient imaging to a freestanding facility, the project will support system-wide capacity management, reduce wait times, and improve patient satisfaction.

Overall, the proposed ODC represents a necessary and well-supported expansion of outpatient diagnostic services in Blount County. It will fill a clear service gap, address increasing utilization trends, and strengthen the overall accessibility, affordability, and efficiency of the region’s healthcare delivery system while complementing existing providers and resources.

- 2. Approval of additional outpatient diagnostic services will be made only when it is demonstrated that existing services in the applicant's geographical service area are not adequate and/or there are special circumstances that require additional services.**

Response: As detailed throughout this application, existing outpatient diagnostic imaging services in Blount County are not adequate to meet the community's current and projected demand. There are no ODCs currently operating within the county. For Patients specifically seeking MRI services must rely exclusively on either a hospital-based unit or a physician office-based unit operated as part of the hospital, both of which operate at high utilization levels. Blount County residents' only other option is to travel into Knoxville to receive care.

Despite the absence of any freestanding ODCs, MRI utilization within Blount County remains exceptionally strong. According to the 2023 Tennessee Health Facilities Commission Medical Equipment Report, the average utilization of existing MRI units in the county was 5,537—nearly double the state's minimum aggregate threshold of 2,880 scans established under the Certificate of Need Standards and Criteria for MRI services. This utilization level clearly indicates that current MRI capacity is insufficient to accommodate both existing and future demand within the service area.

Furthermore, the lack of a freestanding ODC limits patient access to more affordable imaging options. Between 2021 and 2023, the average gross charge for an MRI procedure at Blount Memorial Hospital was \$7,180.77, while the average gross charge at East Tennessee Medical Group—a physician office-based provider—was \$3,527.41. In contrast, freestanding ODCs typically offer imaging services at significantly lower costs, often up to 70 percent less than hospital-based services, resulting in substantial savings for patients, employers, and payors.

The proposed Covenant Health ODC will fill this clear service gap by expanding access to state-of-the-art imaging technology in a convenient, community-based, and cost-effective setting. By providing high-quality diagnostic services at lower cost, the ODC will improve affordability and accessibility for Blount County residents while helping to decompress utilization pressures on existing MRI units. Overall, the project represents a necessary and cost-efficient enhancement to the county's healthcare infrastructure, ensuring that local imaging capacity keeps pace with community growth and clinical demand.

- 3. Any special needs and circumstances:**
- a. The needs of both medical and outpatient diagnostic facilities and services must be analyzed.**

Response: Several factors justify approval of this application. First, there are currently no ODCs operating within Blount County. The county's residents must rely on a limited number of hospital-based providers or physician offices for their imaging needs, which do not offer the same level of convenience, accessibility, or affordability as a dedicated freestanding ODC.

Second, the available MRI units in and near Blount County are already operating at high

utilization levels. According to the most recent data, the average utilization among Blount County's two MRI units was 5,358 scans per unit per year—well above the state's Certificate of Need standard of 2,880 scans per unit per year. This utilization level indicates that current MRI resources are operating at nearly double the minimum threshold and are insufficient to fully meet current and future demand.

Third, Blount County continues to experience strong and sustained population growth. The county's population has grown faster than the state average in recent years, and this trend is projected to continue—further increasing demand for convenient, community-based outpatient diagnostic services.

Finally, the proposed ODC will help decompress MRI and imaging volumes currently handled by hospital-based facilities, many of which must balance inpatient, outpatient, and emergency demand. Shifting appropriate outpatient imaging procedures to a freestanding ODC will improve efficiency and patient throughput across the continuum of care, allowing hospitals to focus on higher-acuity patients and emergency needs.

**b. Other special needs and circumstances, which might be pertinent, must be analyzed.**

Response: Covenant Health operates the two outpatient diagnostic centers equipped with MRIs closest to Blount County in Knoxville – Covenant Health Diagnostics West and Covenant Health Diagnostics South. Travel from Maryville, Tennessee in Blount County to these two locations requires approximately 25 minutes and 17.7 miles (CHD West) or 25 minutes and 17.2 miles (CHD South). The proposed project would eliminate this unnecessary travel burden, especially along Alcoa Highway, which is constantly burdened with ongoing construction.

Moreover, the proposed ODC will be co-located in a new medical park being developed by Covenant Health in the Springbrook area of Alcoa in Blount County. This co-location with numerous other medical clinics and services will foster an integrated care environment that enhances clinical coordination, streamlines imaging referrals and improves continuity of care for patients.

**c. The applicant must provide evidence that the proposed diagnostic outpatient services will meet the needs of the potential clientele to be served.**

- 1. The applicant must demonstrate how emergencies within the outpatient diagnostic facility will be managed in conformity with accepted medical practice.**
- 2. The applicant must establish protocols that will assure that all clinical procedures performed are medically necessary and will not unnecessarily duplicate other services.**

Response: Covenant Health maintains comprehensive protocols to ensure patient safety and continuity of care in all of its outpatient facilities. Staff at the proposed ODC will be trained

and certified in emergency response procedures, including basic and advanced life support, and will follow established system-wide policies for the rapid management of medical emergencies. In the rare event that a patient requires transfer to a hospital for further care, the ODC will maintain formal transfer agreements and collaborative working relationships with nearby hospitals to ensure seamless and timely patient transitions.

The proposed ODC will not result in unnecessary duplication of existing services. Currently, no freestanding ODCs operate in Blount County. The proposed freestanding ODC will also expand access to diagnostic imaging services in a safe, modern, and cost-effective environment without duplicating existing capacity. Rather than diverting patients from current providers, the facility will complement and strengthen the existing healthcare delivery system by accommodating excess outpatient demand, improving patient access and affordability, and reducing the strain on hospital-based imaging departments. In doing so, the project will enhance both the efficiency and responsiveness of the regional healthcare system while ensuring that imaging services remain accessible and medically appropriate for all Blount County residents.

# **LETTER OF INTENT**



**State of Tennessee  
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9<sup>th</sup> Floor, Nashville, TN 37243

[www.tn.gov/hsda](http://www.tn.gov/hsda)

Phone: 615-741-2364

[hsda.staff@tn.gov](mailto:hsda.staff@tn.gov)

**LETTER OF INTENT**

The Publication of Intent is to be published in The Daily Times which is a newspaper of general circulation in Blount County, Tennessee, Tennessee, on or before 01/14/2026 for one day.

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Covenant Health Diagnostics Blount County ODC, a/an newly formed entity owned by Covenant Health Diagnostics LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for Establishment of outpatient diagnostic center in Blount County, Tennessee. The address of the project will be an unaddressed site located between Tesla Blvd. and Highway 129 adjacent to parcel 1440 Tesla Blvd, Alcoa, Blount County, Tennessee, 37701. The estimated project cost will be \$12,733,007.

The anticipated date of filing the application is 02/01/2026

The contact person for this project is Mr. Travis Swearingen who may be reached at Kirkland and Ellis - 1301 Pennsylvania Ave. NW, Washington, DC, 20004 – Contact No. 202-389-5000.

Travis Swearingen	01/12/2026	<a href="mailto:travis.swearingen@kirkland.com">travis.swearingen@kirkland.com</a>
<b>Signature of Contact</b>	<b>Date</b>	<b>Contact’s Email Address</b>

The Letter of Intent must be received between the first and the fifteenth day of the month. If the last day for filing is a Saturday, Sunday, or State Holiday, filing must occur on the next business day. Applicants seeking simultaneous review must publish between the sixteenth day and the last day of the month of publication by the original applicant.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition.

Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at [hsda.staff@tn.gov](mailto:hsda.staff@tn.gov) .

HF 51 (Revised 6/1/2023)

RDA 1651



**State of Tennessee  
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9<sup>th</sup> Floor, Nashville, TN 37243

[www.tn.gov/hsda](http://www.tn.gov/hsda)

Phone: 615-741-2364

[hsda.staff@tn.gov](mailto:hsda.staff@tn.gov)

## **PUBLICATION OF INTENT**

**The following shall be published in the “Legal Notices” section of the newspaper in a space no smaller than two (2) columns by two (2) inches.**

### **NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED**

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Covenant Health Diagnostics Blount County ODC, a/an newly formed entity owned by Covenant Health Diagnostics LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for Establishment of outpatient diagnostic center in Blount County, Tennessee. The address of the project will be an unaddressed site located between Tesla Blvd. and Highway 129 adjacent to parcel 1440 Tesla Blvd, Alcoa, Blount County, Tennessee, 37701. The estimated project cost will be \$12,733,007.

The anticipated date of filing the application is 02/01/2026

The contact person for this project is Mr. Travis Swearingen who may be reached at Kirkland and Ellis - 1301 Pennsylvania Ave. NW, Washington, DC, 20004 – Contact No. 202-389-5000.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at [hsda.staff@tn.gov](mailto:hsda.staff@tn.gov) .

**ORIGINAL**  
**APPLICATION**



**State of Tennessee  
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9<sup>th</sup> Floor, Nashville, TN 37243

[www.tn.gov/hsda](http://www.tn.gov/hsda)

Phone: 615-741-2364

[hsda.staff@tn.gov](mailto:hsda.staff@tn.gov)

## CERTIFICATE OF NEED APPLICATION

### 1A. Name of Facility, Agency, or Institution

Covenant Health Diagnostics Blount County ODC

**Name**

an unaddressed site located between Tesla Blvd. and Highway 129 adjacent to parcel 1440 Tesla Blvd

Blount County

**Street or Route**

County

Alcoa

Tennessee

37701

**City**

**State**

**Zip**

<https://www.covenanthealth.com/>

**Website Address**

**Note:** The facility's name and address **must be** the name and address of the project and **must be** consistent with the Publication of Intent.

### 2A. Contact Person Available for Responses to Questions

Travis Swearingen

Mr.

**Name**

**Title**

Kirkland & Ellis

[travis.swearingen@kirkland.com](mailto:travis.swearingen@kirkland.com)

**Company Name**

**Email Address**

1301 Pennsylvania Ave. NW

**Street or Route**

Washington, DC

Washington

20004

**City**

**State**

**Zip**

Attorney

202-389-5000

**Association with Owner**

**Phone Number**

### 3A. Proof of Publication

Attach the full page of newspaper in which the notice of intent appeared with the mast and dateline intact or submit a publication affidavit from the newspaper that includes a copy of the publication as proof of the publication of the letter of intent. (Attachment 3A)

**Date LOI was Submitted:** 01/12/26

**Date LOI was Published:** 01/15/26

**RESPONSE:** A copy of the published LOI is included as Attachment 3A.

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**4A. Purpose of Review** (*Check appropriate box(es) – more than one response may apply*)

- Establish New Health Care Institution
- Relocation
- Change in Bed Complement
- Addition of a Specialty to an Ambulatory Surgical Treatment Center (ASTC)
- Initiation of MRI Service
- MRI Unit Increase
- Satellite Emergency Department
- Addition of Therapeutic Catheterization
- Positron Emission Tomography (PET) Service
- Initiation of Health Care Service as Defined in §TCA 68-11-1607(3)

Please answer all questions on letter size, white paper, clearly typed and spaced, single sided, in order and sequentially numbered. In answering, please type the question and the response. All questions must be answered. If an item does not apply, please indicate “N/A” (not applicable). Attach appropriate documentation as an Appendix at the end of the application and reference the applicable item Number on the attachment, i.e. Attachment 1A, 2A, etc. The last page of the application should be a completed signed and notarized affidavit.

**5A. Type of Institution** (*Check all appropriate boxes – more than one response may apply*)

- Hospital
- Ambulatory Surgical Treatment Center (ASTC) – Multi-Specialty
- Ambulatory Surgical Treatment Center (ASTC) – Single Specialty
- Home Health
- Hospice
- Intellectual Disability Institutional Habilitation Facility (ICF/IID)
- Nursing Home
- Outpatient Diagnostic Center
- Rehabilitation Facility
- Residential Hospice
- Nonresidential Substitution Based Treatment Center of Opiate Addiction
- Other

Other -

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Hospital -

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**6A. Name of Owner of the Facility, Agency, or Institution**

Covenant Health Diagnostic Centers, LLC

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**Name**

1400 Centerpoint Blvd., Suite 100, Bldg. A

865-374-0411

**Street or Route**

**Phone Number**

Knoxville

Tennessee

37932-2147

**City**

**State**

**Zip**

**7A. Type of Ownership of Control (Check One)**

- Sole Proprietorship
- Partnership
- Limited Partnership
- Corporation (For Profit)
- Corporation (Not-for-Profit)
- Government (State of TN or Political Subdivision)
- Joint Venture
- Limited Liability Company
- Other (Specify)

Attach a copy of the partnership agreement, or corporate charter and certificate of corporate existence. Please provide documentation of the active status of the entity from the Tennessee Secretary of State’s website at <https://tnbear.tn.gov/ECommerce/FilingSearch.aspx>. If the proposed owner of the facility is government owned must attach the relevant enabling legislation that established the facility. (Attachment 7A)

Describe the existing or proposed ownership structure of the applicant, including an ownership structure organizational chart. Explain the corporate structure and the manner in which all entities of the ownership structure relate to the applicant. As applicable, identify the members of the ownership entity and each member’s percentage of ownership, for those members with 5% ownership (direct or indirect) interest.

**RESPONSE:** Covenant Health Diagnostic Centers, LLC is 100% owned by Covenant Medical Group, Inc. ("CMG") CMG is a wholly-owned subsidiary of Fortress Corporation, which will be the lease holder for the land and medical office building where the ODC will be located. Fortress Corporation is wholly-owned by Covenant Health, a non-profit healthcare system operating in East Tennessee and headquartered in Knoxville.

**8A. Name of Management/Operating Entity (If Applicable)**

**Name**

**Street or Route**

**County**

**City**

**State**

**Zip**

**Website Address**

For new facilities or existing facilities without a current management agreement, attach a copy of a draft management agreement that at least includes the anticipated scope of management services to be provided, the anticipated term of the agreement, and the anticipated management fee payment schedule. For facilities with existing management agreements, attach a copy of the fully executed final contract. (Attachment 8A)

**9A. Legal Interest in the Site**

Check the appropriate box and submit the following documentation. (Attachment 9A)

The legal interest described below must be valid on the date of the Agency consideration of the Certificate of Need application.

- Ownership (Applicant or applicant's parent company/owner) – Attach a copy of the title/deed.
  - Lease (Applicant or applicant's parent company/owner) – Attach a fully executed lease that includes the terms of the lease and the actual lease expense.
  - Option to Purchase - Attach a fully executed Option that includes the anticipated purchase price.
  - Option to Lease - Attach a fully executed Option that includes the anticipated terms of the Option and anticipated lease expense.
  - Letter of Intent, or other document showing a commitment to lease the property - attach reference document
  - Other (Specify)
- 

**RESPONSE:** The proposed ODC will operate within leased space of a new medical office building that is owned and controlled by the applicant's parent organization, Covenant Health (through its wholly-owned subsidiary Fortress Corporation).

### **10A. Floor Plan**

If the facility has multiple floors, submit one page per floor. If more than one page is needed, label each page. (Attachment 10A)

- Patient care rooms (Private or Semi-private)
- Ancillary areas
- Other (Specify)

**RESPONSE:** The proposed floor plan is included as Attachment 10A.

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### **11A. Public Transportation Route**

Describe the relationship of the site to public transportation routes, if any, and to any highway or major road developments in the area. Describe the accessibility of the proposed site to patients/clients. (Attachment 11A)

**RESPONSE:** The proposed project will be located at an unaddressed site between N. Hall Road and Tesla Boulevard, immediately off U.S. Highway 129 (Alcoa Highway)—the principal north–south transportation corridor connecting the Cities of Knoxville, Alcoa and Maryville. The site is also situated near U.S. Route 321, the primary east–west highway through Blount County, providing convenient regional access from both residential and commercial areas. The project location benefits from exceptional accessibility and visibility within a rapidly developing corridor of Blount County. The area surrounding the site includes numerous established and emerging residential neighborhoods, retail centers, and major employers. It is also adjacent to significant areas of planned growth, including both residential and commercial developments expected to accommodate the region's continuing population expansion. Public transportation is available through the Blount County Public Transportation System (BCPTS), which provides demand-response transit service throughout Blount County. BCPTS operates vehicles that transport residents to and from medical appointments, employment sites, and other essential destinations on a scheduled basis. While this public service is available to patients who may require assistance with transportation, the applicant anticipates that the vast majority of patients will utilize private vehicles due to the project's convenient location and ample parking.

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### **12A. Plot Plan**

Unless relating to home care organization, briefly describe the following and attach the requested documentation on a letter

size sheet of white paper, legibly labeling all requested information. It **must** include:

- Size of site (in acres);
- Location of structure on the site;
- Location of the proposed construction/renovation; and
- Names of streets, roads, or highways that cross or border the site.

(Attachment 12A)

**RESPONSE:** The proposed plot plan is included as Attachment 12A.

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### 13A. Notification Requirements

- TCA §68-11-1607(c)(9)(B) states that “... If an application involves a healthcare facility in which a county or municipality is the lessor of the facility or real property on which it sits, then within ten (10) days of filing the application, the applicant shall notify the chief executive officer of the county or municipality of the filing, by certified mail, return receipt requested.” Failure to provide the notifications described above within the required statutory timeframe will result in the voiding of the CON application.
  - Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
  - Notification in process, attached at a later date
  - Notification not in process, contact HFC Staff
  - Not Applicable
- TCA §68-11-1607(c)(9)(A) states that “... Within ten (10) days of the filing of an application for a nonresidential substitution based treatment center for opiate addiction with the agency, the applicant shall send a notice to the county mayor of the county in which the facility is proposed to be located, the state representative and senator representing the house district and senate district in which the facility is proposed to be located, and to the mayor of the municipality, if the facility is proposed to be located within the corporate boundaries of the municipality, by certified mail, return receipt requested, informing such officials that an application for a nonresidential substitution based treatment center for opiate addiction has been filed with the agency by the applicant.
  - Notification Attached (Provide signed USPS green-certified mail receipt card for each official notified.)
  - Notification in process, attached at a later date
  - Notification not in process, contact HFC Staff
  - Not Applicable

**EXECUTIVE SUMMARY****1E. Overview**

Please provide an overview not to exceed **ONE PAGE** (for 1E only) in total explaining each item point below.

- Description: Address the establishment of a health care institution, initiation of health services, and/or bed complement changes.

**RESPONSE:**

Covenant Health proposes to develop a new freestanding Outpatient Diagnostic Center (“ODC”) in Alcoa, Blount County, Tennessee. The proposed ODC will offer a comprehensive suite of advanced imaging modalities, including a 1.5T MRI unit, CT, X-ray, bone density, mammography, and ultrasound. The facility will be located at an unaddressed site between N. Hall Road and Tesla Boulevard in Alcoa—an easily accessible area adjacent to major transportation routes and rapidly growing residential and commercial developments.

Currently, Blount County does not have an existing freestanding ODC, creating a clear opportunity to improve access to cost-effective, high-quality outpatient imaging services for area residents. The proposed project will directly address this service gap by providing convenient access to modern imaging technologies within a community that is experiencing steady population growth and increasing demand for outpatient healthcare services.

This project represents a natural extension of Covenant Health’s ongoing strategy to expand access to outpatient care settings that are lower-cost, patient-centered, and well-integrated with its broader healthcare network. The ODC will complement and support existing Covenant Health hospitals, affiliated physician practices, and other healthcare providers throughout the region by offering timely and efficient diagnostic imaging services.

The proposed ODC will enhance convenience and affordability for patients, facilitate more efficient scheduling and turnaround times for imaging, and reduce the burden on hospital-based imaging department at Blount Memorial Medical Center; allowing it to focus resources on higher-acuity inpatient and emergency cases. Additionally, the ODC will serve as a resource for referring physicians and employers seeking efficient, high-quality diagnostic services for their patients and employees.

From a community perspective, the project will improve geographic accessibility to imaging services, support the ongoing growth of physician practices within Blount County, and strengthen the overall healthcare infrastructure of the service area. By providing a modern, easily accessible outpatient imaging alternative, Covenant Health will further its mission to improve the health of the communities it serves through clinical excellence, accessibility, and fiscal responsibility.

- 
- Ownership structure

**RESPONSE:** The proposed ODC will be operated by Covenant Health Diagnostic Centers, LLC – a Tennessee Limited Liability Company which is owned (100%) by Covenant Medical Group, Inc. (“CMG”). CMG is a wholly-owned subsidiary of Covenant Health through Fortress Corporation (another wholly-owned subsidiary of Covenant Health).

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- Service Area

**RESPONSE:** The proposed service area for this project is Blount County.

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- Existing similar service providers

**RESPONSE:** There are currently no existing ODCs in the service area.

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- Project Cost

**RESPONSE:** The total estimate project cost is \$12,733,007. These project costs include the cost of medical imaging equipment, related service agreements, and the valuation of the MOB construction attributable to the proposed ODC.

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- Staffing

**RESPONSE:** As set forth more fully in the project's staffing chart, in Year 1, Covenant anticipates a need for 6.5 direct patient care FTEs and 4.0 non-clinical FTE staff. Covenant anticipates these staff will originate either through a redistribution of existing Covenant staffing resources or through new hiring from Covenant's extensive recruitment network.

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## 2E. Rationale for Approval

A Certificate of Need can only be granted when a project is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effects attributed to competition or duplication would be positive for consumers

Provide a brief description not to exceed ONE PAGE (for 2E only) of how the project meets the criteria necessary for granting a CON using the data and information points provided in criteria sections that follow.

- Need

**RESPONSE:** Several factors justify approval of the application. First, there are currently no freestanding Outpatient Diagnostic Centers (ODCs) operating within Blount County. The county’s residents must rely on a limited number of hospital-based MRI providers, which do not offer the same level of convenience, accessibility, or affordability as a dedicated freestanding ODC. Currently, there are two MRIs located in Blount County - one at Blount Memorial Medical Center and the other in the East Tennessee Medical Group physician office that is licensed as a part of Blount Memorial. Even when operated as physician office-based MRI, however, the ETRG unit was limited to ETRG group patients and is substantially more expensive than the applicant's proposed ODC as outlined below. Regardless, neither unit qualifies as a freestanding ODC, leaving a distinct service gap in the outpatient diagnostic imaging market. Second, the available MRI units in and near Blount County are already operating at high utilization levels. According to the most recent 2024 Tennessee Health Facilities Commission (THFC) Medical Equipment Registry, the average utilization among Blount County’s two MRI units was 5,358 scans per unit per year—well above the state’s Certificate of Need standard of 2,880 scans per unit per year. This utilization level indicates that current MRI resources are operating at nearly double the minimum threshold and are insufficient to fully meet current and future demand. Third, Blount County continues to experience strong and sustained population growth, driven by regional economic development, proximity to Knoxville, and the presence of major employers and expanding residential areas. The county’s population has grown faster than the state average in recent years, and this trend is projected to continue—further increasing demand for convenient, community-based outpatient diagnostic services. Fourth, the proposed ODC will help decompress MRI and imaging volumes currently handled by hospital-based facilities, many of which must balance inpatient, outpatient, and emergency demand. Shifting appropriate outpatient imaging procedures to a freestanding ODC will improve efficiency and patient throughput across the continuum of care, allowing hospitals to focus on higher-acuity patients and emergency needs. Finally, the proposed ODC aligns with state health planning goals by improving geographic accessibility, reducing patient travel time, increasing affordability through lower-cost outpatient care settings, and enhancing the overall efficiency of the regional healthcare delivery system. Collectively, these factors—the absence of an existing ODC, high utilization of existing MRI capacity, population growth, system demand, and alignment with state planning objectives—provide clear, compelling evidence of need and strong justification for approval of this application.

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- Quality Standards

**RESPONSE:** The applicant is firmly committed to ensuring that all patients served at the proposed ODC receive the highest quality of care in a safe, patient-centered environment. All diagnostic imaging services provided at the facility will be delivered under the direction and oversight of experienced clinical leaders and credentialed physicians affiliated with Covenant Health, one of East Tennessee’s most trusted healthcare systems. Covenant Health maintains rigorous system-wide quality and safety programs that are fully aligned with national best practices and performance standards. The same policies, procedures, and clinical protocols that govern imaging operations across Covenant Health’s network will be implemented at the new ODC to ensure consistency, reliability, and excellence in patient care. These include adherence to evidence-based imaging protocols, ongoing staff education and competency validation, and continuous monitoring of clinical performance indicators such as image quality, accuracy of interpretation, patient safety, and satisfaction metrics. The ODC will operate in full compliance with all applicable federal, state, and local regulatory requirements, including those related to licensure. The applicant also plans to

pursue accreditation by the American College of Radiology (ACR), as well as other relevant accrediting bodies as appropriate. In addition, patients receiving care at the ODC will benefit from the extensive clinical collaboration, technology integration, and care coordination resources of Covenant Health's comprehensive healthcare network. This includes seamless communication with referring physicians, access to system-wide electronic health records, and participation in quality improvement initiatives that promote accuracy, efficiency, and optimal patient outcomes. Through these measures, the applicant will ensure that the proposed ODC consistently meets or exceeds all applicable quality, safety, and performance standards. The project will reflect Covenant Health's ongoing mission to improve the quality of life in the communities it serves by delivering exceptional, patient-focused care supported by clinical excellence and accountability.

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- Consumer Advantage

- Choice

**RESPONSE:** The proposed ODC will be the first freestanding facility of its kind in Blount County, expanding consumer choice and access to high-quality diagnostic imaging in a convenient, lower-cost outpatient setting. Unlike physician practice-based MRI units, which are generally limited to the practice's own patients, the ODC will be open to all residents and referring providers, offering greater scheduling flexibility, shorter wait times, and more affordable pricing than hospital-based imaging departments. By providing accessible, cost-effective imaging services in a patient-centered environment, the project will enhance competition, improve convenience, and deliver clear value to patients, payers, and the broader community.

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- Improved access/availability to health care service(s)

**RESPONSE:** The proposed ODC will enhance affordability and value for patients, payors, and the broader community by providing high-quality imaging services in a lower-cost, freestanding outpatient setting. The ODC will improve geographic access for Blount County residents and visitors while offering a convenient alternative to higher-cost hospital-based imaging departments. The ODC's 1.5T MRI and other imaging modalities will be available to all patients, including those with limited financial resources or payer restrictions, helping ensure that cost is not a barrier to care. In addition, by shifting appropriate outpatient imaging volumes from hospital campuses, the project will relieve pressure on existing hospital imaging departments, allowing those facilities to focus on acute and emergent cases while maintaining timely access for all patients across the Covenant Health system.

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- Affordability

**RESPONSE:** As a non-hospital-based facility, the proposed freestanding ODC will offer more affordable imaging services than the hospital-based options currently available to Blount County residents. Imaging services performed at freestanding centers can often cost substantially less than comparable hospital-based procedures, providing significant savings for patients, payers, and employers while maintaining the same high level of quality and safety. The ODC will be fully accessible to all patients, regardless of payer source, and will participate in both Medicare and TennCare programs. Consistent with Covenant Health's long-standing commitment to equitable access, the facility will contract with all TennCare Managed Care Organizations operating in the area. As a nonprofit, community-based health system, Covenant Health is dedicated to serving all individuals—including those with limited financial means—and the proposed ODC will uphold this mission through established charity care policies and financial assistance programs designed to ensure that cost is never a barrier to receiving essential diagnostic services.

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### 3E. Consent Calendar Justification

- Letter to Executive Director Requesting Consent Calendar (Attach Rationale that includes addressing the 3 criteria)

Consent Calendar NOT Requested

If Consent Calendar is requested, please attach the rationale for an expedited review in terms of Need, Quality Standards, and Consumer Advantage as a written communication to the Agency's Executive Director at the time the application is filed.

**4E. PROJECT COST CHART**

A. Construction and equipment acquired by purchase:		
1. Architectural and Engineering Fees	_____	
2. Legal, Administrative (Excluding CON Filing Fee), Consultant Fees	_____	
3. Acquisition of Site	_____	
4. Preparation of Site	_____	
5. Total Construction Costs	_____	
6. Contingency Fund	_____	
7. Fixed Equipment (Not included in Construction Contract)	_____	
8. Moveable Equipment (List all equipment over \$50,000 as separate attachments)	_____	\$4,356,820
9. Other (Specify): <u>Furnishings</u>	_____	\$300,000
B. Acquisition by gift, donation, or lease:		
1. Facility (inclusive of building and land)	_____	\$8,047,602
2. Building only	_____	
3. Land only	_____	
4. Equipment (Specify): _____	_____	
5. Other (Specify): _____	_____	
C. Financing Costs and Fees:		
1. Interim Financing	_____	
2. Underwriting Costs	_____	
3. Reserve for One Year's Debt Service	_____	
4. Other (Specify): _____	_____	
D. Estimated Project Cost (A+B+C)	_____	\$12,704,422
E. CON Filing Fee	_____	\$28,585
F. Total Estimated Project Cost (D+E)	<b>TOTAL</b>	\$12,733,007

## GENERAL CRITERIA FOR CERTIFICATE OF NEED

In accordance with TCA §68-11-1609(b), “no Certificate of Need shall be granted unless the action proposed in the application for such Certificate is necessary to provide needed health care in the area to be served, will provide health care that meets appropriate quality standards, and the effect attributed to completion or duplication would be positive for consumers.” In making determinations, the Agency uses as guidelines the goals, objectives, criteria, and standards adopted to guide the agency in issuing certificates of need. Until the agency adopts its own criteria and standards by rule, those in the state health plan apply.

Additional criteria for review are prescribed in Chapter 11 of the Agency Rules, Tennessee Rules and Regulations 01730-11.

The following questions are listed according to the three criteria: (1) Need, (2) the effects attributed to competition or duplication would be positive for consumers (Consumer Advantage), and (3) Quality Standards.

### **NEED**

The responses to this section of the application will help determine whether the project will provide needed health care facilities or services in the area to be served.

- 1N.** Provide responses as an attachment to the applicable criteria and standards for the type of institution or service requested. A word version and pdf version for each reviewable type of institution or service are located at the following website. <https://www.tn.gov/hsda/hsda-criteria-and-standards.html> (Attachment 1N)

#### **RESPONSE:**

Responses to the applicable criteria and standards have been included as Attachments 1N.A.

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- 2N.** Identify the proposed service area and provide justification for its reasonable ness. Submit a county level map for the Tennessee portion and counties boarding the state of the service area using the supplemental map, clearly marked, and shaded to reflect the service area as it relates to meeting the requirements for CON criteria and standards that may apply to the project. Please include a discussion of the inclusion of counties in the border states, if applicable. (Attachment 2N)

#### **RESPONSE:**

See Attachment 2N for the required map designating the proposed service area of Blount County, as required by the Health Facilities Commission. The proposed service area is reasonable given the geographic, demographic, and healthcare utilization characteristics of Blount County. The area demonstrates a clear and well-documented need for additional MRI capacity and improved access to outpatient imaging services.

Blount County currently lacks a freestanding ODC, leaving residents reliant on hospital-based MRI units. These existing resources are limited in accessibility, as hospital-based imaging is typically higher in cost and less convenient, while physician practice–based units generally serve only that practice’s patients.

The defined service area was established through an analysis of current MRI utilization data, population distribution, and patient travel patterns within Blount County. Utilization metrics demonstrate that existing MRI units in the county operate at volumes well above the state’s Certificate of Need threshold, indicating that current capacity is insufficient to meet community demand. The proposed service area therefore represents a logical and data-supported market in which to locate a new freestanding ODC to enhance local access, affordability, and patient choice for diagnostic imaging services.

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Complete the following utilization tables for each county in the service area, if applicable.

**PROJECTED UTILIZATION**

Unit Type: <input checked="" type="checkbox"/> Procedures <input type="checkbox"/> Cases <input type="checkbox"/> Patients <input type="checkbox"/> Other    _____		
<b>Service Area Counties</b>	<b>Projected Utilization Recent Year 1 (Year = 2028)</b>	<b>% of Total</b>
Blount	11,812	95.00%
Other not primary/secondary county	622	5.00%
Total	12,434	100%

3N. A. Describe the demographics of the population to be served by the proposal.

**RESPONSE:**

Between CY 2024 and 2028, the population of Blount County is projected to grow steadily by approximately 3.4 percent, exceeding the statewide growth rate of 2.9 percent. This continued population expansion reflects both the county’s strong economic base and its increasing attractiveness as a place to live and work within the Knoxville metropolitan region.

Although the proposed Outpatient Diagnostic Center will serve patients of all ages, the primary target population is adults aged 18 and older. The adult population of Blount County is expected to grow by approximately 3.6 percent between CY 2024 and 2028, compared to projected statewide growth of 3.1 percent. Blount County’s population is also slightly older than the state average, with a median age of approximately 43.0 years compared to 39.1 years statewide. An older population typically requires more frequent imaging services to support the diagnosis and management of chronic and age-related conditions, further reinforcing the need for expanded outpatient diagnostic capacity.

Collectively, these demographic conditions —steady population growth and a larger and aging adult population —clearly support the reasonableness of the proposed service area and the need for additional, accessible outpatient imaging capacity within Blount County.

**B.** Provide the following data for each county in the service area:

- Using current and projected population data from the Department of Health. ([www.tn.gov/health/health-program-areas/statistics/health-data/population.html](http://www.tn.gov/health/health-program-areas/statistics/health-data/population.html));
- the most recent enrollee data from the Division of TennCare (<https://www.tn.gov/tenncare/information-statistics/enrollment-data.html>),
- and US Census Bureau demographic information (<https://www.census.gov/quickfacts/fact/table/US/PST045219>).

**RESPONSE:**

The requested demographic information is included as Attachment 3N.

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- 4N. Describe the special needs of the service area population, including health disparities, the accessibility to consumers, particularly those who are uninsured or underinsured, the elderly, women, racial and ethnic minorities, TennCare or Medicaid recipients, and low income groups. Document how the business plans of the facility will take into consideration the special needs of the service area population.

**RESPONSE:**

Although Blount County generally benefits from a strong and growing economy, a portion of its residents continue to experience challenges related to healthcare access and affordability. Approximately 13.4 percent of Blount County residents between the ages of 19 and 65 lack health insurance, underscoring the ongoing need for providers who are committed to serving all patients, regardless of payer status. In addition, portions of the county include populations with limited access to transportation and other social determinants that can impact their ability to obtain timely diagnostic services.

The proposed freestanding ODC will serve all residents of the service area—regardless of race, ethnicity, gender, age, income level, or insurance coverage. Consistent with Covenant Health’s mission as a not-for-profit, community-based healthcare organization, the ODC will ensure equitable access to high-quality imaging services for insured, uninsured, and underinsured individuals alike.

Covenant Health and its affiliates have long been among the region’s leading providers of medical imaging and other healthcare services for Medicare beneficiaries, TennCare enrollees, and uninsured populations across East Tennessee. The proposed ODC will continue this commitment by maintaining policies and procedures that ensure patients are not denied access to care due to an inability to pay. The facility will adhere to Covenant Health’s established charity care and financial assistance policies, which are designed to support patients with limited financial resources.

In addition, the ODC will contract with all TennCare Managed Care Organizations (MCOs) operating in the area, further expanding access for TennCare enrollees and low-income individuals. By offering convenient, community-based imaging services in an accessible and affordable outpatient setting, the project will help reduce barriers to care, support early diagnosis and treatment, and contribute to improved health outcomes across all segments of the Blount County population.

- 5N. Describe the existing and approved but unimplemented services of similar healthcare providers in the service area. Include utilization and/or occupancy trends for each of the most recent three years of data available for this type of project. List each provider and its utilization and/or occupancy individually. Inpatient bed projects must include the following data: Admissions or discharges, patient days. Average length of stay, and occupancy. Other projects should use the most appropriate measures, e.g. cases, procedures, visits, admissions, etc. This does not apply to projects that are solely relocating a service.

**RESPONSE:**

There are currently no existing or approved ODC services located in the proposed service area. There is one hospital-based MRI unit and one physician office practice-based MRI unit (operated as department of Blount Memorial) in Blount County. See Attachment 5N for a table of reported MRI utilization from these two units for the most recent three years of reporting—CY2022 through CY2024.

- 6N. Provide applicable utilization and/or occupancy statistics for your institution services for each of the past three years and the project annual utilization for each of the two years following completion of the project. Additionally, provide the details regarding the methodology used to project utilization. The methodology must include detailed calculations or documentation from referral sources, and identification of all assumptions.

**RESPONSE:**

There is no historical utilization for this project. Projected utilization of MRI services for the two years following completion of the project is included as part of Attachment 1N.B. The applicant projects a total of 2,393 procedures in

Year 1 (2028) and 2,766 procedures in Year 2 (2029). These utilization projections satisfy the utilization threshold per MRI unit as outlined by the State Health Plan for the initiation of MRI services. Similarly, as described in response to Question 9C, across all modalities, the applicant projects a total of 12,434 procedures in Year 1 (2028) and 18,733 procedures in Year 2 (2029). Utilization projections were developed by analyzing the historic and projected imaging utilization in Blount County combined with evaluating historic utilization at existing Covenant ODCs in the region.

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- 7N. Complete the chart below by entering information for each applicable outstanding CON by applicant or share common ownership; and describe the current progress and status of each applicable outstanding CON and how the project relates to the applicant, and the percentage of ownership that is shared with the applicant's owners.

**RESPONSE:**

Covenant Health does not currently have any outstanding CONs.

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**CONSUMER ADVANTAGE ATTRIBUTED TO COMPETITION**

The responses to this section of the application helps determine whether the effects attributed to competition or duplication would be positive for consumers within the service area.

- 1C. List all transfer agreements relevant to the proposed project.

**RESPONSE:** As a new ODC, the applicant does not currently have executed transfer agreements. Consistent with how emergencies are planned for and effectively managed at other Covenant Health ODC locations, staff will be trained on the handling of any medical emergency, emergency equipment will be kept within the medical imaging suite, and patient transfer agreements will be established both with Blount Memorial and Covenant's hospitals in Knoxville.

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- 2C. List all commercial private insurance plans contracted or plan to be contracted by the applicant.

- Aetna Health Insurance Company
- Ambetter of Tennessee Ambetter
- Blue Cross Blue Shield of Tennessee
- Blue Cross Blue Shield of Tennessee Network S
- Blue Cross Blue Shiled of Tennessee Network P
- BlueAdvantage
- Bright HealthCare
- Cigna PPO
- Cigna Local Plus
- Cigna HMO - Nashville Network
- Cigna HMO - Tennessee Select
- Cigna HMO - Nashville HMO
- Cigna HMO - Tennessee POS
- Cigna HMO - Tennessee Network
- Golden Rule Insurance Company
- HealthSpring Life and Health Insurance Company, Inc.
- Humana Health Plan, Inc.
- Humana Insurance Company
- John Hancock Life & Health Insurance Company
- Omaha Health Insurance Company
- Omaha Supplemental Insurance Company
- State Farm Health Insurance Company
- United Healthcare UHC

- UnitedHealthcare Community Plan East Tennessee
- UnitedHealthcare Community Plan Middle Tennessee
- UnitedHealthcare Community Plan West Tennessee
- WellCare Health Insurance of Tennessee, Inc.
- Others

**RESPONSE:** Aetna, AmeriGroup, Cigna Medicare Advantage, Humana ChoiceCare, Humana Medicare Advantage, National Provider Network - Commercial, NX Healthcare, TriCare (Champus) - Military, United HealthCare Medicare Advantage, Direct to Employer Contracting, Workers Compensation, Traditional Medicare.

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- 3C. Describe the effects of competition and/or duplication of the proposal on the health care system, including the impact upon consumer charges and consumer choice of services.

**RESPONSE:**

The proposed ODC will have a positive and complementary effect on the healthcare system in Blount County. The project will not duplicate existing services, as there are currently no freestanding ODCs in the county. The only MRI services available are a hospital-based and physician office-based unit (operated as a department of Blount Memorial), both of which are highly utilized. According to the most recent data, Blount County MRI units operate well above the state's Certificate of Need volume threshold of 2,880 scans per unit per year, clearly indicating a need for additional imaging capacity.

By introducing a modern, freestanding ODC, Covenant Health will expand access to high-quality, state-of-the-art imaging services in a convenient and affordable outpatient environment. The new ODC will improve patient access, reduce wait times, and provide meaningful cost savings, as imaging services at freestanding centers typically cost up to 70 percent less than comparable hospital-based services. This will directly benefit consumers, payers, and employers, while also supporting the area's physician community by offering timely, efficient diagnostic resources for patient management and care coordination.

Rather than diverting volume from existing providers, the proposed ODC will help decompress imaging demand at the local hospital, allowing it to focus resources on inpatient and emergency cases. The project will strengthen the overall efficiency, quality, and responsiveness of the local healthcare delivery system, aligning with state policy objectives to promote access, affordability, and competition in outpatient healthcare. Additionally, the project's accessible location—near major transportation corridors and rapidly growing residential and commercial areas—will make it an attractive option for patients who live or work in the service area, as well as for those traveling through the region.

Overall, the proposed ODC will enhance competition in a constructive manner by expanding consumer choice, improving affordability, and strengthening the healthcare infrastructure in Blount County without unnecessary duplication of services.

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- 4C. Discuss the availability of and accessibility to human resources required by the proposal, including clinical leadership and adequate professional staff, as per the State of Tennessee licensing requirements, CMS, and/or accrediting agencies requirements, such as the Joint Commission and Commission on Accreditation of Rehabilitation Facilities.

**RESPONSE:**

Many, if not all, of the employees needed to support the proposed ODC during the first few years of the project are already employed by Covenant Health and are working currently at other outpatient medical imaging sites within the Covenant Health network of affiliate organizations. Additionally, the affiliated organizations involved with this project have a proven track record of finding, hiring, and developing excellent clinical leadership and professional staff consistent with all relevant licensing and accreditation requirements.

- 5C. Document the category of license/certification that is applicable to the project and why. These include, without limitation, regulations concerning clinical leadership, physician supervision, quality assurance policies and programs, utilization review policies and programs, record keeping, clinical staffing requirements, and staff education.

**RESPONSE:**

The proposed facility will be licensed by the State of Tennessee as an Outpatient Diagnostic Center. If approved, it is anticipated that the proposed ODC will seek and receive accreditation from the American College of Radiology (ACR).

The applicant has reviewed and understands all relevant licensing certification requirements of the State of Tennessee and appropriate accrediting agencies for medical/clinical staff. It is worth noting that the clinical and operational leaders directly involved with this proposed ODC project have many years of combined experience operating and maintaining important accreditations within outpatient medical imaging settings. Likewise, the leadership of Covenant Health (including CMG and other affiliates) have significant experience seeking, securing, and maintaining various licensure requirements, certifications, and applicable accreditations. Accordingly, the applicant will comply with State licensure requirements and all applicable regulations.

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## PROJECTED DATA CHART

- Project Only  
 Total Facility

Give information for the *two (2)* years following the completion of this proposal.

	<b>Year 1</b>	<b>Year 2</b>
	2028	2029
A. Utilization Data		
Specify Unit of Measure <u>Procedures</u>	12434	18733
B. Revenue from Services to Patients		
1. Inpatient Services	\$0.00	\$0.00
2. Outpatient Services	\$4,290,384.00	\$6,210,044.00
3. Emergency Services	\$0.00	\$0.00
4. Other Operating Revenue (Specify) _____	\$0.00	\$0.00
<b>Gross Operating Revenue</b>	<b>\$4,290,384.00</b>	<b>\$6,210,044.00</b>
C. Deductions from Gross Operating Revenue		
1. Contractual Adjustments	\$2,080,016.00	\$3,007,304.00
2. Provision for Charity Care	\$42,904.00	\$62,100.00
3. Provisions for Bad Debt	\$150,163.00	\$217,352.00
<b>Total Deductions</b>	<b>\$2,273,083.00</b>	<b>\$3,286,756.00</b>
<b>NET OPERATING REVENUE</b>	<b>\$2,017,301.00</b>	<b>\$2,923,288.00</b>

7C. Please identify the project’s average gross charge, average deduction from operating revenue, and average net charge using information from the Historical and Projected Data Charts of the proposed project.

**Project Only Chart**

	Previous Year to Most Recent Year	Most Recent Year	Year One	Year Two	% Change (Current Year to Year 2)
<b>Gross Charge</b> ( <i>Gross Operating Revenue/Utilization Data</i> )	\$0.00	\$0.00	\$345.05	\$331.50	0.00
<b>Deduction from Revenue</b> ( <i>Total Deductions/Utilization Data</i> )	\$0.00	\$0.00	\$182.81	\$175.45	0.00
<b>Average Net Charge</b> ( <i>Net Operating Revenue/Utilization Data</i> )	\$0.00	\$0.00	\$162.24	\$156.05	0.00

8C. Provide the proposed charges for the project and discuss any adjustment to current charges that will result from the implementation of the proposal. Additionally, describe the anticipated revenue from the project and the impact on existing patient charges.

**RESPONSE:**

The proposed project is a new ODC facility so there are no existing patient charges for comparison or adjustment. The charges for the proposed Blount County ODC will be similar to those for other existing Covenant Health ODCs in the greater Knoxville area.

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9C. Compare the proposed project charges to those of similar facilities/services in the service area/adjoining services areas, or to proposed charges of recently approved Certificates of Need.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

**RESPONSE:**

The average gross charge for all imaging procedures to be performed at the ODC in Year 1 is projected at \$345.05. There are no existing ODCs in the service area with which to compare this proposed charge. Moreover, the Commission's medical equipment registry only includes gross charges for specialty imaging equipment such as MRI and PET.

Focusing only on MRI charges, the applicant's projected gross charge for an MRI in Year 1 is \$689.84. This charge is consistent with the gross charges at Covenant Health's existing ODCs in Knoxville. By comparison, the gross charge for an MRI at Blount Memorial Medical Center in 2024 was \$6,601.90 and the gross charge for an MRI at the East Tennessee Medical Group in 2024 was \$3,763.22.

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- 10C.** Report the estimated gross operating revenue dollar amount and percentage of project gross operating revenue anticipated by payor classification for the first and second year of the project by completing the table below.

If applicable, compare the proposed charges of the project to the current Medicare allowable fee schedule by common procedure terminology (CPT) code(s).

**Applicant's Projected Payor Mix  
Project Only Chart**

Payor Source	Year-2028		Year-2029	
	Gross Operating Revenue	% of Total	Gross Operating Revenue	% of Total
Medicare/Medicare Managed Care	\$793,292.00	18.49	\$1,148,237.00	18.49
TennCare/Medicaid	\$230,823.00	5.38	\$334,100.00	5.38
Commercial/Other Managed Care	\$2,776,736.00	64.72	\$4,019,141.00	64.72
Self-Pay	\$262,142.00	6.11	\$379,434.00	6.11
Other(Specify)	\$227,391.00	5.30	\$329,132.00	5.30
<b>Total</b>	\$4,290,384.00	100%	\$6,210,044.00	100%
Charity Care	\$42,904.00		\$62,100.00	

*\*Needs to match Gross Operating Revenue Year One and Year Two on Projected Data Chart*

Discuss the project's participation in state and federal revenue programs, including a description of the extent to which Medicare, TennCare/Medicaid, and medically indigent patients will be served by the project.

**RESPONSE:** The project will be accessible to all patients regardless of payor source. Historically, Covenant Health and its affiliates have provided a significant level of care to patients participating in both Medicare and TennCare funded programs. The new ODC will participate in these government sponsored programs – and, consistent with Covenant Health's practice at its other facilities, the ODC will contract with all TennCare MCOs in the area. Additionally, Covenant Health, as a nonprofit community-based organization, is committed to serve all people, including those with limited resources. The proposed ODC will maintain appropriate charity care policies and other programs to assist such individuals. The project will be accessible to insured, uninsured, and underinsured patients.

## **QUALITY STANDARDS**

- 1Q.** Per PC 1043, Acts of 2016, any receiving a CON after July 1, 2016, must report annually using forms prescribed by the Agency concerning appropriate quality measures. Please attest that the applicant will submit an annual Quality Measure report when due.

Yes

No

- 2Q.** The proposal shall provide health care that meets appropriate quality standards. Please address each of the following questions.

- Does the applicant commit to maintaining the staffing comparable to the staffing chart presented in its CON application?

Yes

No

- Does the applicant commit to obtaining and maintaining all applicable state licenses in good standing?
  - Yes
  - No
  
- Does the applicant commit to obtaining and maintaining TennCare and Medicare certification(s), if participation in such programs are indicated in the application?
  - Yes
  - No

3Q. Please complete the chart below on accreditation, certification, and licensure plans. Note: if the applicant does not plan to participate in these type of assessments, explain why since quality healthcare must be demonstrated.

Credential	Agency	Status (Active or Will Apply)	Provider Number or Certification Type
Licensure	<input checked="" type="checkbox"/> Health Facilities Commission/Licensure Division <input type="checkbox"/> Intellectual & Developmental Disabilities <input type="checkbox"/> Mental Health & Substance Abuse Services	Will Apply	
Certification	<input checked="" type="checkbox"/> Medicare <input checked="" type="checkbox"/> TennCare/Medicaid <input type="checkbox"/> Other _____	Will Apply Will Apply	
Accreditation(s)	ACR – American College of Radiology	Will Apply	

4Q. If checked “TennCare/Medicaid” box, please list all Managed Care Organization’s currently or will be contracted.

- AMERIGROUP COMMUNITY CARE- East Tennessee
- AMERIGROUP COMMUNITY CARE - Middle Tennessee
- AMERIGROUP COMMUNITY CARE - West Tennessee
- BLUECARE - East Tennessee
- BLUECARE - Middle Tennessee
- BLUECARE - West Tennessee
- UnitedHealthcare Community Plan - East Tennessee
- UnitedHealthcare Community Plan - Middle Tennessee
- UnitedHealthcare Community Plan - West Tennessee
- TENNCARE SELECT HIGH - All
- TENNCARE SELECT LOW - All
- PACE
- KBB under DIDD waiver
- Others

5Q. Do you attest that you will submit a Quality Measure Report annually to verify the license, certification, and/or accreditation status of the applicant, if approved?

- Yes
- No

6Q. For an existing healthcare institution applying for a CON:

- Has it maintained substantial compliance with applicable federal and state regulation for the three years prior to the CON application. In the event of non-compliance, the nature of non-compliance and corrective action should be discussed to include any of the following: suspension of admissions, civil monetary penalties, notice of 23-day or 90-day termination proceedings from Medicare/Medicaid/TennCare, revocation/denial of accreditation, or other similar actions and what measures the applicant has or will put into place to avoid similar findings in the future.

- Yes
- No
- N/A

- Has the entity been decertified within the prior three years? If yes, please explain in detail. (This provision shall not apply if a new, unrelated owner applies for a CON related to a previously decertified facility.)

- Yes
- No
- N/A

**7Q.** Respond to all of the following and for such occurrences, identify, explain, and provide documentation if occurred in last five (5) years.

**Has any of the following:**

- Any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant);
- Any entity in which any person(s) or entity with more than 5% ownership (direct or indirect) in the applicant (to include any entity in the chain of ownership for applicant) has an ownership interest of more than 5%; and/or.

**Been subject to any of the following:**

- Final Order or Judgement in a state licensure action;
  - Yes
  - No
- Criminal fines in cases involving a Federal or State health care offense;
  - Yes
  - No
- Civil monetary penalties in cases involving a Federal or State health care offense;
  - Yes
  - No
- Administrative monetary penalties in cases involving a Federal or State health care offense;
  - Yes
  - No
- Agreement to pay civil or administrative monetary penalties to the federal government or any state in cases involving claims related to the provision of health care items and services;
  - Yes
  - No
- Suspension or termination of participation in Medicare or TennCare/Medicaid programs; and/or
  - Yes
  - No
- Is presently subject of/to an investigation, or party in any regulatory or criminal action of which you are aware.
  - Yes
  - No

8Q. Provide the project staffing for the project in Year 1 and compare to the current staffing for the most recent 12-month period, as appropriate. This can be reported using full-time equivalent (FTEs) positions for these positions.

Existing FTE not applicable (Enter year)

Position Classification	Existing FTEs(enter year)	Projected FTEs Year 1
<b>A. Direct Patient Care Positions</b>		
CT Tech	0.00	1.00
Ultrasound Tech	0.00	1.00
MRI Tech	0.00	1.50
Mammography Tech	0.00	2.00
X-Ray Tech	0.00	1.00
<b>Total Direct Patient Care Positions</b>	N/A	6.5

<b>B. Non-Patient Care Positions</b>		
Registration	0.00	4.00
<b>Total Non-Patient Care Positions</b>	N/A	4
<b>Total Employees (A+B)</b>	0	10.5

<b>C. Contractual Staff</b>		
Contractual Staff Position	0.00	0.00
<b>Total Staff (A+B+C)</b>	0	10.5

## **DEVELOPMENT SCHEDULE**

TCA §68-11-1609(c) provides that activity authorized by a Certificate of Need is valid for a period not to exceed three (3) years (for hospital and nursing home projects) or two (2) years (for all other projects) from the date of its issuance and after such time authorization expires; provided, that the Agency may, in granting the Certificate of Need, allow longer periods of validity for Certificate of Need for good cause shown. Subsequent to granting the Certificate of Need, the Agency may extend a Certificate of Need for a period upon application and good cause shown, accompanied by a non-refundable reasonable filing fee, as prescribed by rule. A Certificate of Need authorization which has been extended shall expire at the end of the extended time period. The decision whether to grant an extension is within the sole discretion of the Commission, and is not subject to review, reconsideration, or appeal.

- Complete the Project Completion Forecast Chart below. If the project will be completed in multiple phases, please identify the anticipated completion date for each phase.
- If the CON is granted and the project cannot be completed within the standard completion time period (3 years for hospital and nursing home projects and 2 years for all others), please document why an extended period should be approved and document the “good cause” for such an extension.

### **PROJECT COMPLETION FORECAST CHART**

Assuming the Certificate of Need (CON) approval becomes the final HFC action on the date listed in Item 1 below, indicate the number of days from the HFC decision date to each phase of the completion forecast.

<b>Phase</b>	<b>Days Required</b>	<b>Anticipated Date (Month/Year)</b>
1. Initial HFC Decision Date		03/25/26
2. Building Construction Commenced	270	12/19/26
3. Construction 100% Complete (Approval for Occupancy)	600	11/14/27
4. Issuance of License	625	12/09/27
5. Issuance of Service	650	01/03/28
6. Final Project Report Form Submitted (Form HR0055)	675	01/28/28

Note: If litigation occurs, the completion forecast will be adjusted at the time of the final determination to reflect the actual issue date.

**OPERATING AGREEMENT  
OF  
COVENANT HEALTH DIAGNOSTIC CENTERS, LLC**

**THIS OPERATING AGREEMENT** (this “Agreement”) is made by the undersigned sole Member of the Company to be effective as of the 27<sup>th</sup> day of January 2026.

WITNESSETH:

**WHEREAS**, the Sole Member desires to set forth certain rights and obligations pertaining to the internal affairs of the Company and the conduct of its business.

**NOW, THEREFORE**, the Sole Member sets forth the following:

**ARTICLE 1**

**General**

1.1 Effective Date of Agreement. The effective date of this Agreement (the “Effective Date”) shall be the date first set forth above.

1.2 Organization. The Company was formed as a limited liability company pursuant to the Tennessee Revised Limited Liability Company Act (the “Act”) by causing Articles of Organization (the “Articles”) to be filed with the Tennessee Secretary of State, Division of Business Services. Except as stated in this Agreement, the Act and the Articles shall govern the rights and liabilities of the Sole Member. The Sole Member shall continue to file such documents as appropriate to comply with the applicable requirements for the operation of a limited liability company in accordance with the laws of the State of Tennessee so long as the Company conducts business therein. The Company may establish places of business within the State of Tennessee, as and when required by its business and may appoint agents for service of process in all jurisdictions in which the Company shall conduct business.

1.3 Sole Member. The Company’s sole member is Covenant Medical Group, Inc. (the “Sole Member”).

1.4 Company’s Name and Registered Office. The name of the limited liability company is Covenant Health Diagnostic Centers, LLC (the “Company”). The Company’s registered agent and registered office shall be as set forth in the Articles.

1.5 Principal Business Address of Company. The Company’s principal business address shall be 244 Fort Sanders West Boulevard, Knoxville, TN 37922. The Sole Member may change the Company's principal place of business, from time to time, to any location permitted by law.

1.6 Limited Liability of Sole Member. The Sole Member shall not be personally obligated to any third party for any debt, obligation, or liability of the Company solely by reason of being a member.

1.7 Relation of Agreement to Articles. If there is any conflict between the provisions of this Agreement and those of the Articles, the provisions of the Articles shall prevail.

1.8 Charitable Purpose of Covenant Health. The Sole Member is an Affiliate of Covenant Health, a Tennessee nonprofit corporation exempt from Federal income taxation (“Covenant Health”). For so long as the Sole Member, Covenant Health or its Affiliate holds Units in the Company, it shall cause the Company to operate its business in a manner that results in (i) the promotion of health for a broad cross-section of the community, (ii) the provision of a reasonable level of charity care pursuant to the charity care and financial assistance policies of Covenant Health and (iii) the provision of quality healthcare and related services at reasonable costs pursuant to the Charity Care Policies (collectively, the “Charitable Purpose”). “Affiliate” shall mean with respect to any Person, (a) any other Person who, directly or indirectly (including through one or more intermediaries), controls, is controlled by, or is under common control with, such Person, (b) any individual who is a director or officer (i) of such Person or (ii) of any subsidiary of such Person, or (c) with respect to an individual, an immediate family member of such Person. For purposes of this definition, “control,” when used with respect to any specified Person, shall mean the power, direct or indirect, to direct or cause the direction of the management and policies of such Person, whether through ownership of voting securities or partnership or other ownership interests, by contract or otherwise; and the terms “controlling” and “controlled” shall have correlative meanings.

1.9 Sole Member Expectations. (i) The Sole Member and its Affiliates will refrain from any actions to require or encourage physicians who are employees or independent contractors of Covenant Medical Group, Inc. or any other Affiliate that employs physicians or other healthcare providers, and medical staff members of an Affiliate of Covenant Health (“Hospital-Affiliated Physicians”) to refer patients to the facilities operated by the Company (the “Centers”); (ii) neither the Sole Member nor its Affiliates will track referrals, if any, by Hospital-Affiliated Physicians to the Centers; (iii) any compensation paid by the Sole Member or its Affiliates to Hospital-Affiliated Physicians will not take into account, in any way, any referrals Hospital-Affiliated Physicians may make to the Centers; and (iv) the Sole Member and its Affiliates will inform the Hospital-Affiliated Physicians annually of the foregoing measures.

## ARTICLE 2

### Capital Contributions

The Sole Member shall own 100% of the membership interests of the Company (the “Membership Interest”) and shall have no duty to make capital contributions to the Company.

## ARTICLE 3

### Allocations and Distributions of Company Profits

Only the Sole Member shall be entitled to allocations of Company profits and losses and to distributions of Company profits and other Company assets. It shall be within the sole and exclusive discretion of the Sole Member to decide whether to distribute cash and other assets to

the Sole Member. No other Person shall have any right to any such allocations or distributions. For purposes of this Agreement, "Person" means any individual, corporation, partnership, trust, joint stock company, business trust, unincorporated association, joint venture, or other entity of any nature whatsoever.

## ARTICLE 4

### Company Management

4.1 Member-Managed. Company shall be member-managed, in that the management and control of Company shall rest with the Sole Member exclusively in its membership capacity. The Sole Member shall have all the rights and powers provided to members under this Agreement, the Articles, and those provisions of the Act that do not conflict with the rights and powers granted to the Sole Member under this Agreement.

4.2 Meetings of the Sole Member.

(a) Regular Meetings. Meetings of the Sole Member shall be held at such times and at such places as may be fixed by the Sole Member.

(b) Special Meetings. Special meetings of the Member may be called by the Sole Member.

4.3 Officers; Appointment; Resignation. The Company shall have a President and Secretary. Each officer shall be appointed by the Sole Member and shall hold office until he or she resigns or is terminated by the Sole Member pursuant to this Article IV. Any officer may resign by delivering his or her written resignation to the Company at its office, or to the Sole Member, and such resignation shall be effective upon receipt, unless it is specified to be effective at some other time or upon the happening of some other event.

(a) Officer Eligibility. Except as otherwise provided by the Act, any person shall be eligible for election as an officer of the Company whether or not they are a Member.

(b) Removal of Officers. Any officer may be removed by the Sole Member, with or without cause.

(c) President. The President shall be the chief executive officer of the Company and shall, subject to the provisions set forth hereinafter, have the authority to oversee such administrative activities and to take such administrative actions as shall be customary for a chief executive officer. The President shall perform such additional duties as may be delegated to him or her by the Sole Member or as may be imposed by applicable law. It shall be the duty of the President, and he or she shall have the power to see to it, that all orders and resolutions of the Sole Member are carried into effect.

(d) Secretary. The Secretary shall keep the records of the Company, of the Sole Member, and shall perform such duties and have such powers in addition to the foregoing as the President or the Sole Member shall designate.

(e) Initial Officers. The officers of the Company as of the Effective Date are Chad Clabough, President, and M. Douglas Campbell, Jr., Secretary.

## ARTICLE 5

### Transfers and Pledges of Memberships Interests

5.1 Transfers of Membership Interests. The Sole Member, in the Sole Member's sole discretion, may transfer (whether by sale, gift or otherwise) all or any part of the Sole Member's membership rights, including financial rights and/or governance rights, to any Person at any time. The Sole Member may make any such transfer under any terms and conditions which the Sole Member deems appropriate.

5.2 Pledges. The Sole Member shall have exclusive and absolute discretion to pledge all or any part of the Sole Member's membership rights to any Person at any time as collateral for any debt of the Sole Member. The Sole Member may make any such pledge under any terms and conditions which the Sole Member deems appropriate.

## ARTICLE 6

### Accounting and Tax

6.1 Books and Records. The Company shall maintain on a current basis accurate books of account.

6.2 Tax Characterization. It is the intention of the Sole Member that the Company be disregarded for federal tax purposes and that the activities of the Company be deemed to be activities of the Sole Member for such purposes. All provisions of the Company's Articles and this Agreement are to be construed so as to preserve that tax status under those circumstances.

6.3 Annual Accounting Period of Company. The Company's annual accounting period for financial and tax purposes shall be identical to that of the Sole Member.

## ARTICLE 7

### Dissolution

7.1 Definition of Dissolution, Winding Up and Liquidation. For purposes of this Agreement:

(a) Dissolution. The dissolution of the Company shall mean the cessation of its normal business activities and the beginning of the process of winding it up and liquidating it.

(b) Winding Up. The winding up of the Company shall mean the process of concluding its existing business activities and internal affairs and preparing for its liquidation.

(c) Liquidation. The liquidation of the Company shall mean the sale or other disposition of its assets and the distribution of its assets (or the distribution of the proceeds of the sale or other disposition of its assets) to its creditors and to the Sole Member.

7.2 Dissolution of Company. The Sole Member may determine whether and when to dissolve the Company.

7.3 Winding Up and Liquidation of Company; Distribution of Company Assets. Promptly after a determination is made to dissolve the Company and terminate its legal existence, the Company shall wind up its business and internal affairs, shall liquidate it, and shall distribute its assets to the Company's creditors and the Sole Member in accordance with the Act.

## ARTICLE 8

### Term and Termination

The term of this Agreement shall begin on the Effective Date and shall end upon the earlier of:

- (a) The date on which the Company ceases to exist under this Agreement or under other applicable law; or
- (b) The date on which the Sole Member determines to terminate the Agreement.

## ARTICLE 9

### Miscellaneous Provisions

9.1 Amendments. No amendment of this Agreement shall be valid unless it is set forth in a writing signed by the Sole Member.

9.2 Governing Law. This Agreement shall be governed exclusively by the laws of the State of Tennessee.

9.3 Captions. Captions in this Agreement are for convenience only and shall be deemed irrelevant in construing its provisions.

## END OF OPERATING AGREEMENT

*[signature page to follow]*

**IN WITNESS WHEREOF**, this Operating Agreement of Covenant Health Diagnostic Centers, LLC, is executed by the Sole Member of the Company as of the Effective Date specified herein.

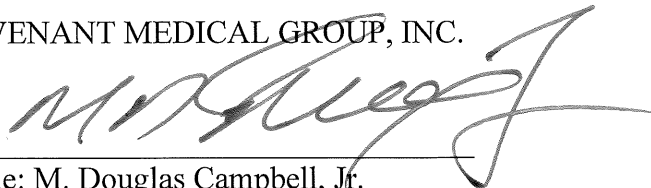
SOLE MEMBER:

COVENANT MEDICAL GROUP, INC.

By: \_\_\_\_\_

Name: M. Douglas Campbell, Jr.

Title: Authorized Representative

A handwritten signature in black ink, appearing to read "M. Douglas Campbell, Jr.", is written over a horizontal line. The signature is fluid and cursive.



**Tre Hargett**  
Secretary of State

**Division of Business and Charitable Organizations**

**Department of State**

State of Tennessee  
312 Rosa L. Parks Avenue, 6th Floor  
Nashville, Tennessee 37243  
Phone: 615-741-2286  
tncab.tnsos.gov/portal/

KEN TUCKER  
244 FORT SANDERS WEST BOULEVARD  
KNOXVILLE, TN 37922, USA

01/26/2026

**Request Type: Certificate of Existence/Authorization**

Issuance Date: 01/26/2026

Request #: C2026008874

**Document Receipt**

Order Number: C2026008874

Verification #: EFABE3DF

Receipt #: 2026-89356

Filing Fee: \$20.00

Payment: Credit Card - 3914311774

\$20.00

Entity Name:	COVENANT HEALTH DIAGNOSTIC CENTERS, LLC	Initial Filing Date:	03/12/2020
SOS Control #:	001085678	Formation Locale:	TENNESSEE
Entity Type:	Limited Liability Company (LLC)	Duration Term:	Perpetual
Status:	Active	Annual Report Due:	04/01/2026
Fiscal Year Close:	December		
Business County:	KNOX		
Managed By:	Member Managed		
Obligated Member Entity:	No		

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**COVENANT HEALTH DIAGNOSTIC CENTERS, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Verification #: EFABE3DF



**Division of Business and Charitable Organizations**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks Avenue, 6th Floor  
Nashville, Tennessee 37243  
Phone: 615-741-2286  
tncab.tnsos.gov/portal/

**Tre Hargett**  
Secretary of State

KEN TUCKER  
244 FORT SANDERS WEST BOULEVARD  
KNOXVILLE, TN 37922, USA

**Request Type: Certified Copies** Issuance Date: 01/26/2026  
Order #: C2026008874 Copies Requested: 1

**Document Receipt**

Receipt #: 2026-89356 Filing Fee: \$20.00  
Payment: Credit Card - 3914311774 \$20.00

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that **COVENANT HEALTH DIAGNOSTIC CENTERS, LLC**, Control # 001085678 was formed or qualified to do business in the State of Tennessee on 03/12/2020. COVENANT HEALTH DIAGNOSTIC CENTERS, LLC has a home jurisdiction of TENNESSEE and is currently in Active status. The attached documents are true and correct copies and were filed in this office on the date(s) indicated below.

Tre Hargett  
Secretary of State

**Tracking #**                      **Date Filed**                      **Filing Description**

## **Attachment 8A: Management Agreement**

Because Covenant Health Diagnostics LLC will manage the new facility itself, the applicant does not intend to have a management agreement. However, to proceed with filing, the CON Application Portal still requires applicants to upload a document as Attachment 8A. Thus, the applicant submits this document as Attachment 8A in order to satisfy the portal requirements and proceed with filing. The applicant is happy to answer any supplemental questions the Commission may have regarding the management of the facility.

## OPTION TO LEASE

This Option to Lease (“Agreement”) is entered into as of the date last signed below by and between **COVENANT HEALTH**, a Tennessee nonprofit corporation (“Lessor”) and **COVENANT HEALTH DIAGNOSTIC CENTERS, LLC**, a Tennessee limited liability company (“Lessee”).

### Background

Lessor owns land located at an unaddressed site between N. Hall Road and Tesla Boulevard, immediately off U.S. Highway 129 (Alcoa Highway), Alcoa, Tennessee, on which it plans to construct a medical office space (the “Building”). Lessee seeks, and Lessor desires to grant, an option to lease space in the Building for use as an independent diagnostic testing facility (IDTF). In consideration of the sum of Ten Dollars (\$10.00) cash in hand paid, the receipt of which is hereby acknowledged, Lessor hereby grants unto Lessee the exclusive option to Lease the real property herein described on the following terms and conditions.

1. **DESCRIPTION.** Lessor grants to Lessee the option to lease office space in the Building when it is constructed.
2. **OPTION PERIOD.** This option shall be effective as of the date last signed below. The option may be exercised at any time. Notice shall be in writing, delivered or mailed to the Lessor at the following addresses:

Covenant Health  
244 Fort Sanders West Blvd.  
Knoxville, Tennessee, 37922  
Attn: M. Douglas Campbell, Jr., General Counsel

3. **LEASE TERMS.** In the event Lessee exercises this option, the parties shall enter into a lease incorporating the following terms:
  - Rent shall be at an initial rate of \$46.00 per square foot, which equates to approximately \$460,000 annually based on the estimated 10,000 square feet contemplated for the IDTF plus a pro-rata share of the common areas.
  - The lease shall contain an initial term of ten (10) years, with Lessee having options for two (2) renewal terms of five (5) years each.
  - The lease shall be on a net basis, with Lessee being responsible for, among other things, all costs of occupancy (including repairs and maintenance of the leased premises appropriately prorated if said systems service the entire building) and a pro-rata share of real estate taxes, insurance and common area maintenance. Lessor will perform

(or cause to be performed) all necessary repairs, maintenance, and/or replacement of major building systems.

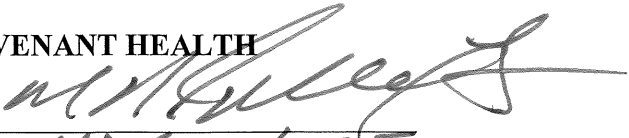
- Lessee shall be responsible for costs and expenses of all trade fixtures and equipment necessary to the operation of the IDTF.
  - The lease will contain mutually acceptable language consistent with the foregoing and containing such other terms and conditions as the parties shall mutually agree.
4. **FAILURE TO EXERCISE OPTION.** If the Lessee does not exercise the option, the consideration paid for this option shall be retained by the Lessor and neither party shall have any further rights or claims against the other.
  5. **EXECUTION OF LEASE AGREEMENT.** The lease transaction forming the subject of this option shall be executed by Lessor and Lessee within sixty (60) days after the option is exercised by the Lessee even though such date may extend beyond the option period set forth in paragraph 2. If the option is exercised, then the moneys paid for said option and any extension will be applied to the lease payments.
  6. **BENEFITS.** This Agreement shall be binding on and shall inure to the benefit of Lessor and Lessee and their respective heirs, executors, administrators, successors and assigns.

**[SIGNATURE PAGE TO FOLLOW]**

IN WITNESS WHEREOF, the parties have executed this Agreement effective as of the date last signed below.


**LESSOR**

**COVENANT HEALTH**

By:   
Name: MD Campbell, Jr.  
Title: EVP  
Date: 1/28/26

**LESSEE**

**COVENANT HEALTH DIAGNOSTIC CENTERS, LLC**

By:   
Chad Clabough, President  
Date: 1/28/26

# East Tennessee Classifieds



For Assistance call 865-981-1170 or email [classified@thedailytimes.com](mailto:classified@thedailytimes.com)  
Place ad 24/7 go to [www.TheDailyTimes.com](http://www.TheDailyTimes.com) Click on Classifieds

**MERCHANDISE**

**BUILDING MATERIALS**

**SCHLAGE FRONT ENTRY HANDLESET** Camelot Aged Bronze. New. \$75.00  
r.henry53@yahoo.com (865)459-9858

**CLOTHING**

**LADIES JEANS** Size 18 and 20. About 8 pairs. Assorted colors. Like new. Pics available. \$75.00 (865)363-8085

**WOMEN'S PANTS** Different colors, sizes 7, 9, & 11. \$15.00 for all three. (865)983-6608

**FIREWOOD**

**FIREWOOD FOR SALE** Red or White Seasoned Oak. \$100.00 for a rick or \$110.00 for a pickup load. Delivered. 865-257-1325 or (865)257-1329

**FREE MERCHANDISE**

**SLIDING GLASS DOORS** for bathtub. Used, in good condition. (865)202-1849

**FURNITURE**

**BARSTOOLS** 2 Windsor back light oak swivel seat 29" high. Total height - 48". Very sturdy. Pics available. Pair \$90.00. (865)995-9229

**MEDICAL/DENTAL**

**FURNITURE**

**GLASS TOP COFFEE TABLE** Beautiful All Wood With storage compartment. 58" x 22" x 17". \$250 with free rocker/glider chair. (865)803-2050

**OTTOMAN** Gold Fabric Cover. Great condition. \$10.00. (865)983-6608

**MEDICAL SUPPLIES**

**KNEE ROLLATOR** Great Condition. \$65.00. (865)518-1260

**MERCHANDISE UNDER \$500**

**BEAUTIFUL MAGNAVOX CABINET** has AM/FM radio/8 track tape player with 2 Optimus T-100 extension speakers and 53 8-track tapes. \$400.00 (865)803-2050

**MERCHANDISE UNDER \$100**

**MCCOY POTTERY** White bowl and pitcher and teapot. Very nice. Pics available. \$75.00 (865)363-8085

**MISCELLANEOUS**

**COACH BRUCE PEARL AUTOGRAPH** Nice "new" football signed by Bruce Pearl, Tennessee Coach. In brand new case. \$50.00 (865)363-3999

**MEDICAL/DENTAL**

**MISCELLANEOUS**

**COOKWARE** Kitchen Fair Cast Aluminum. Speckled almond. Dutch oven + 2 qt., 1qt. and lids = 6 pcs for \$75.00. Pics available. (865)995-9229

**MILK GLASS TABLE LAMP** White hobnail. With glass shade. Vintage. Beautiful. Pics available. \$100.00 (865)363-8085

**SET OF 4 TIRES** Trail Cutter All Terrain LT275/65r18 123/1206. Went on 2018 Ford F150. \$100.00 865-518-1260 or email: phillipwilliam9471@gmail.com

**TAPERED CANDLES** 12" tall. Light blue. 6 boxes of 12 candles. \$20.00 (865)388-8813

**WILLIAM BYRON AUTOGRAPH** 2020 Panini Prism #25 William Byron Autograph racing card with holder. \$75.00 (865)363-3999

**TOOLS**

**PITTSBURGH 19" 1/2" DRIVE** Breaker Bar New. \$10.00 (865)995-9229

**PETS/LIVESTOCK**

**DOMESTIC PETS**

**YORKIE PUPPY FOR SALE** Beautiful, 10 weeks old, male. \$500.00. 865-207-2536

**PET SUPPLIES**

**FOLDING DOG STEPS** Wood Frame. 4 steps with covers. Adjusts to 3 ft. \$15.00 (865)983-6608

**MEDICAL/DENTAL**

**PUBLIC NOTICES**

**PUBLIC NOTICES**

**PUBLIC NOTICES**



State of Tennessee  
Health Facilities Commission

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243

[www.tn.gov/hsda](http://www.tn.gov/hsda) Phone: 615-741-2364  
hsda.staff@tn.gov

**LETTER OF INTENT**

The Publication of Intent is to be published in The Daily Times which is a newspaper of general circulation in Blount County, Tennessee, on or before 01/15/2026 for one day.

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that Covenant Health Diagnostics Blount County ODC, a/an newly formed entity owned by Covenant Health Diagnostics LLC with an ownership type of Limited Liability Company and to be managed by itself intends to file an application for a Certificate of Need for Establishment of outpatient diagnostic center in Blount County, Tennessee. The address of the project will be an unaddressed site located between Tesla Blvd. and Highway 129 adjacent to parcel 1440 Tesla Blvd, Alcoa, Blount County, Tennessee, 37701. The estimated project cost will be \$12,733,007.

The anticipated date of filing the application is 02/01/2026

The contact person for this project is Mr. Travis Swearingen who may be reached at Kirkland and Ellis - 1301 Pennsylvania Ave. NW, Washington, DC, 20004 – Contact No. 202-389-5000.

Travis Swearingen	01/12/2026	travis.swearingen@kirkland.com
<b>Signature of Contact</b>	<b>Date</b>	<b>Contact's Email Address</b>

The Letter of Intent must be received between the first and the fifteenth day of the month. If the last day for filing is a Saturday, Sunday, or State Holiday, filing must occur on the next business day. Applicants seeking simultaneous review must publish between the sixteenth day and the last day of the month of publication by the original applicant.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition.

Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 502 Deaderick Street, Nashville, TN 37243 or email at [hsda.staff@tn.gov](mailto:hsda.staff@tn.gov).

HF 51 (Revised 6/1/2023)  
RDA 1651

**Pharmacy Technician**

Blount Discount Pharmacy is looking to hire a full-time experienced Pharmacy Technician.

**Qualifications**

- High School diploma or GED
- Must be at least 18 years of age
- Must be professional, dependable, possess positive attitude, good judgment, and be able to work as a team
- Self-motivated, able to organize, prioritize and plan to meet deadlines
- Have good communication skills with management and peers
- Maintain a current national and/or state certification and state pharmacy technician registration according to state requirements
- Understand and adhere to Health Insurance Portability and Accountability Act (HIPAA) regulations
- Must be willing and able to adequately perform all essential job functions and tasks of a certified pharmacy technician
- Doesn't have any criminal and/or State Board of Pharmacy registration or licensure actions
- Must pass background check and drug test

**Responsibilities**

- Provide direct patient intervention by providing health and wellness service and experiences relevant to the patient as allowable by and consistent with state and federal laws
- Provide an excellent customer experience while accurately and efficiently completing all steps of reception, data entry, adjudication, and product dispensing
- Ensure execution of store standards by leading by example and asking for assistance as necessary
- Assist in inventory management including, but not limited to, reconciling orders, returns process, and prepare physical inventory
- Provide excellent customer service skills and provide attention to detail
- Ability to handle highly confidential information
- Assist pharmacist in all responsibilities; except those that require a pharmacist's professional judgment
- Comply with and reinforce all sanitation and safety regulations/guidelines/procedures and programs according to company, local, state and federal health code, regulations; identify unsafe conditions and notify management
- Report all illegal activity, including robbery, theft, or fraud, and comply with local, state, and federal regulations

**We Offer**

- Opportunity for paid holidays
- 401(k)
- Accrual of sick time and vacation time
- Medical, Dental and Vision insurance

We are an equal opportunity employer.

Send resume to: [amanda@blountdiscountpharmacy.com](mailto:amanda@blountdiscountpharmacy.com)

**FIND YOUR PASSION**



East Tennessee Jobs  
THE DAILY TIMES

For Assistance call 865-981-1170 or email [classified@thedailytimes.com](mailto:classified@thedailytimes.com)  
Place ad 24/7 go to [www.TheDailyTimes.com](http://www.TheDailyTimes.com) Click on Classifieds

**FREE MONEY**

Sell anything priced under \$100 with a FREE Classified ad!

Limited Space Available

Headline: \_\_\_\_\_  
Item Description: \_\_\_\_\_  
Asking Price (required): \_\_\_\_\_  
Contact Number/Email: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mail: The Daily Times, 226 Gill Street, Alcoa, TN 37701  
Email: [classified@thedailytimes.com](mailto:classified@thedailytimes.com)  
Fax: (865) 981-1117

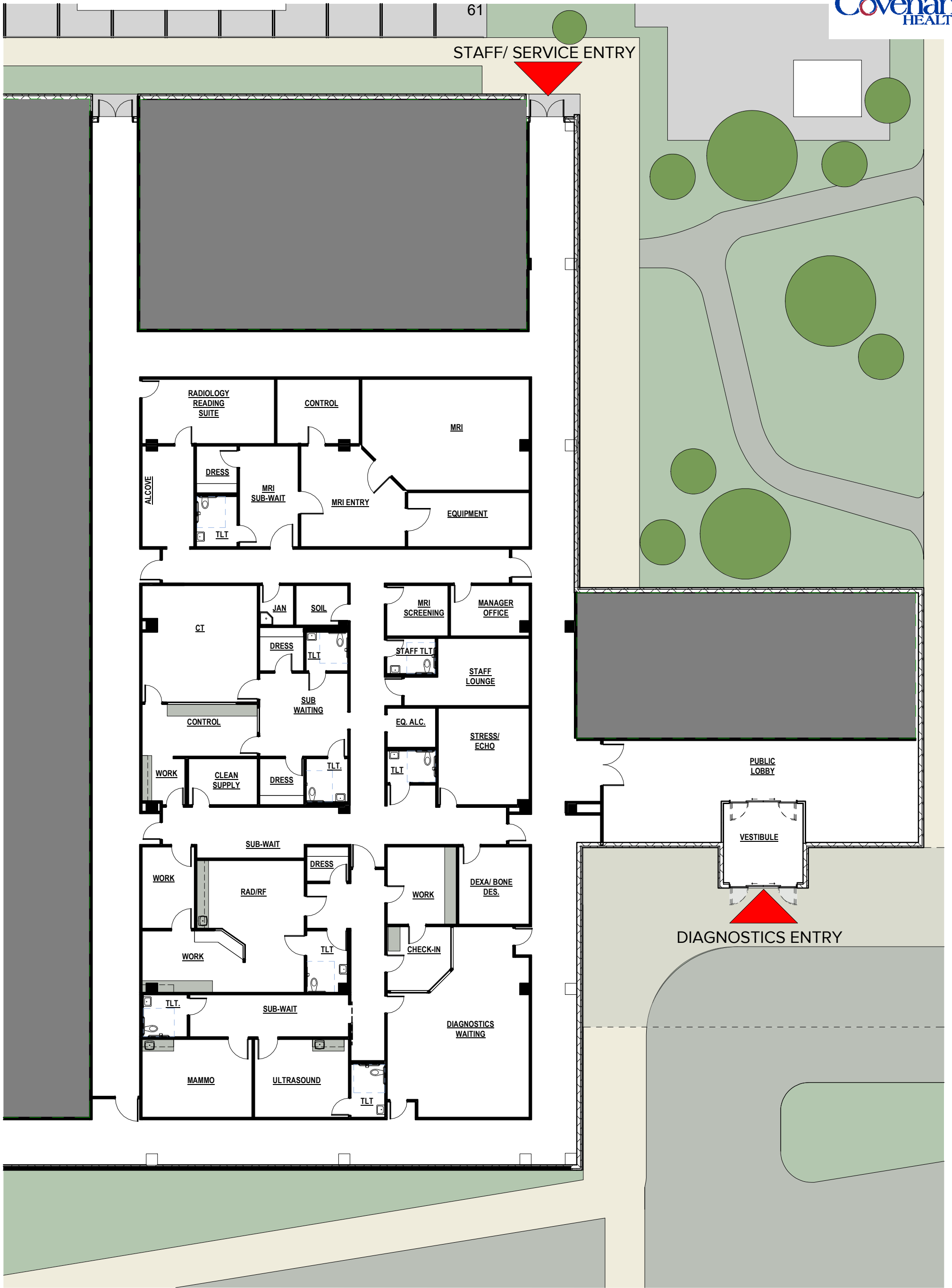
**1 ITEM PER AD**

3 ads per household per week. Each item may run 1 time only. No businesses including home based businesses. No pet ads. Ads must be emailed, mailed in or brought in to the office. Free ads are NOT taken by phone.  
Other restrictions may apply. (Free ads run 3 days in print and online)

**THE DAILY TIMES**  
Your Life. Your Times.

61

STAFF/ SERVICE ENTRY



**FLOOR PLAN**

SCALE: 1/16" = 1'-0"





OUTPATIENT DIAGNOSTICS CENTER

PHASE 1 & PHASE 2 COMBINED SITE: 13.55 ACRES

PARKING (12)

PARKING (148)

PARKING (16)

PARKING (40)

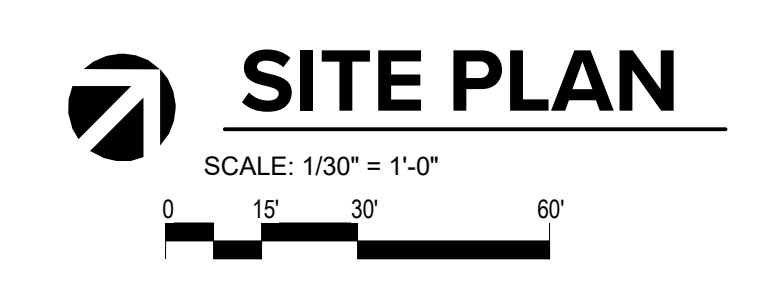
HOPKINS ST.

FLEMING ST.

TESLA BLVD.

PAULING ST.

CENTENNIAL PARK BLVD.



CERTIFICATE OF OWNERSHIP AND GENERAL DEDICATION

I (WE), HEREBY CERTIFY THAT I AM (AND THE OWNERS) OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ADAPT THIS PLAN OF SUBDIVISION TO MY (OUR) BEST INTERESTS, ESTABLISH THE NECESSARY BOUNDARY RESTRICTIONS, AND DEDICATE ALL STREETS, COMMON AREAS, WALKS, AND OTHER SPACES TO PUBLIC USE AS NOTED

DATE: 07/29/24  
OWNER: [Signature]  
OTHER: [Signature]

CERTIFICATE OF STORMWATER MAINTENANCE CONTROL MEASURES

I (we) hereby certify that I (we) as the owner(s) (development) acknowledge that the stormwater management measures included in this plat, state and federal regulations, or provisions have been made for the installation, in the subdivision shown herein and that the stormwater control measures shall be properly maintained and operated by the property owner, property owners' association, or other entity identified on this plat.

DATE: 07/29/24  
DATE (DESIGN/DEVELOPER): [Signature]

CERTIFICATE OF SURVEY ACCURACY

I hereby certify that the above and described herein is a true and correct copy of the accuracy required by the Alcoa Municipal Regional Planning Commission and the necessary data have been provided to the satisfaction of the Subdivisor/Restitutor for Alcoa, Tennessee. This is a Category 1 Land Survey as defined in the rules of professional conduct of the State Board of Professional Engineers and Surveyors.

DATE: 7/30/24  
REGISTERED PROFESSIONAL ENGINEER AND SURVEYOR: [Signature]

CERTIFICATE OF APPROVAL OF WATER

I hereby certify that water appropriations have been installed in an acceptable manner and in compliance with all local, state and federal regulations, or provisions have been made for the installation, in the subdivision shown herein.

DATE: 7/30/24  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

CERTIFICATE OF APPROVAL OF SANITARY SERVICES

I hereby certify that sanitary sewer improvements have been installed in an acceptable manner and in compliance with all local, state and federal regulations, or provisions have been made for the installation, in the subdivision shown herein.

DATE: 7/30/24  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

CERTIFICATE OF APPROVAL FOR RECREATION

I hereby certify that the subdivision plan shown has been found to comply with the subdivision regulations for Alcoa, Tennessee, and that the necessary data have been provided to the satisfaction of the Subdivisor/Restitutor for Alcoa, Tennessee.

DATE: 7/30/24  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

CERTIFICATE OF APPROVAL OF ELECTRIC

I hereby certify that electric improvements have been installed in an acceptable manner and in compliance with all local, state and federal regulations, or provisions have been made for the installation, in the subdivision shown herein.

DATE: 7/30/24  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

CERTIFICATE OF APPROVAL OF STORMWATER

I hereby certify that stormwater improvements have been installed in an acceptable manner and in compliance with all local, state and federal regulations, or provisions have been made for the installation, in the subdivision shown herein.

DATE: 7/30/24  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

CERTIFICATE OF APPROVAL OF STREET NAMES

I hereby certify that (1) the names of existing public roads shown on this subdivision plan in the subdivision shown herein are correct; (2) the names of any new roads, whether public or private, do not duplicate any existing names and will remain approved; (3) the names of the lots shown on this plan are in conformance with L-911 system.

DATE: 7-30-2024  
LOCAL HEALTH DEPARTMENT APPROVING AGENT: [Signature]

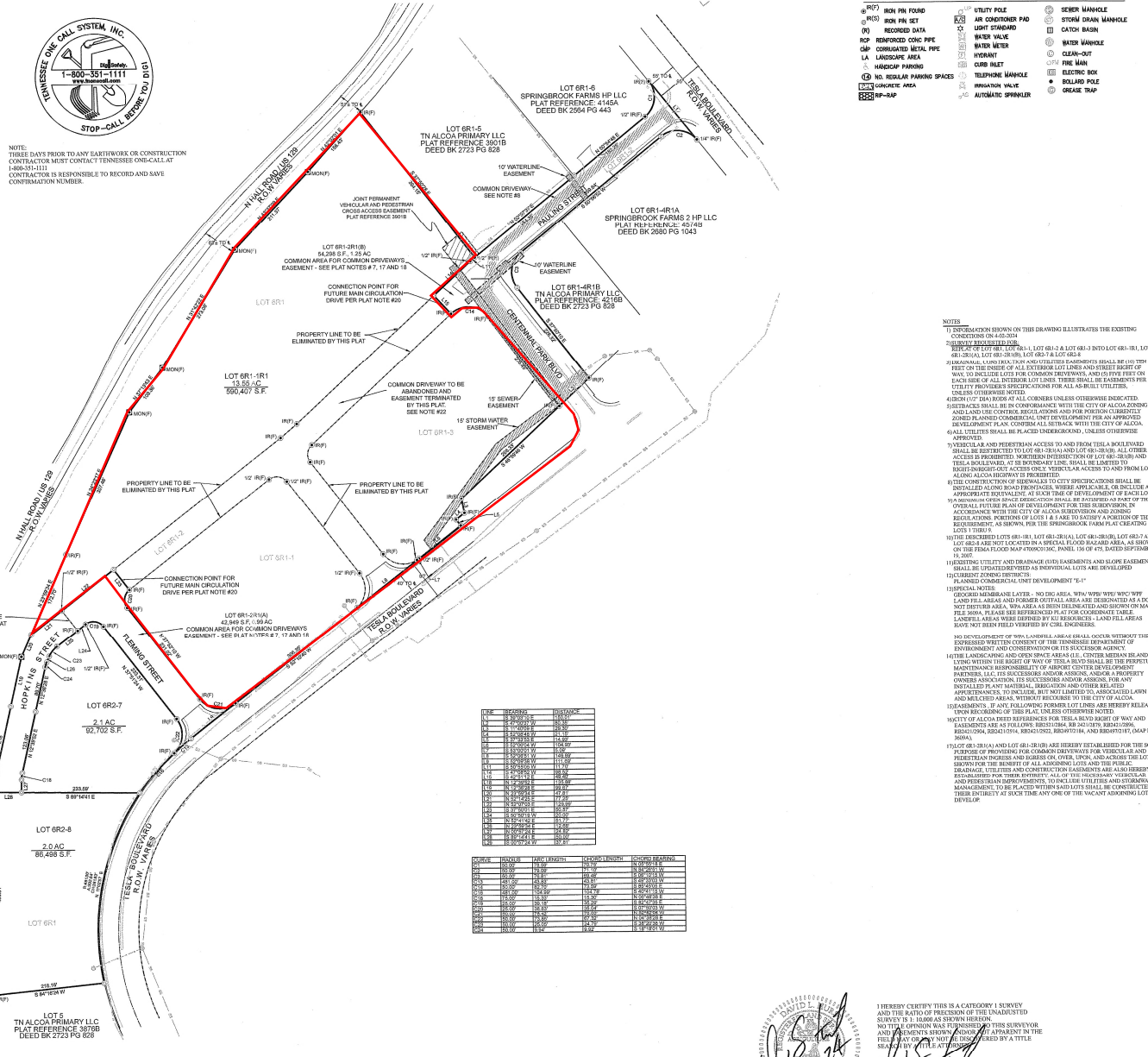
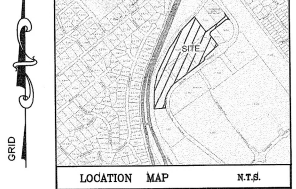


Table with columns: LOT, AREA, PERCENT, DISTANCE, etc. listing lot details and survey data.



OWNER: TN ALCOA PRIMARY LLC, 201 FIVEPLAZA, STE 400, GREENVILLE, SC 29601

- NOTES: 1) THE PROPERTY SHOWN ON THIS DRAWING ILLUSTRATES THE EXISTING CONDITIONS ON 4-20-2024. 2) THE PROPERTY SHOWN ON THIS DRAWING ILLUSTRATES THE EXISTING CONDITIONS ON 4-20-2024. 3) THE PROPERTY SHOWN ON THIS DRAWING ILLUSTRATES THE EXISTING CONDITIONS ON 4-20-2024.

RGC&A  
ROBERT G. CAMPBELL & ASSOCIATES, L.P.  
CONSULTING ENGINEERS  
KNOXVILLE & SEVIERVILLE, TENNESSEE  
621 Wall Street  
Sevierville, Tennessee 37862  
Phone: (865) 429-4683 FAX: (865) 429-4684



I HEREBY CERTIFY THIS IS A CATEGORY 1 SURVEY AND THE RATIO OF PRECISION OF THE UNADJUSTED SURVEY IS 1:5000 AS SHOWN HEREON. NO OTHER OPINION WAS FURNISHED TO THE SURVEYOR AND NO OTHER OPINION IS APPLICABLE TO THIS FILE. ANY OTHER OPINION IS NOT BEING EXPRESSED BY A TITLE SURVEYOR.

SURVEYOR: DAVID L. HURST  
TENNESSEE REGISTRATION NUMBER 1866

FINAL PLAT OF RE-SUBDIVISION  
LOT 6R1-1, LOT 6R1-1, LOT 6R1-2 & LOT 6R1-3  
INTO LOT 6R1-1(R1), LOT 6R1-2(R1A),  
LOT 6R1-2(R1B), LOT 6R2-7 & LOT 6R2-8  
SPRINGBROOK FARM  
CITY OF ALCOA, TENNESSEE  
9th CIVIL DISTRICT, BLOUNT COUNTY, TENNESSEE  
TAX MAP 36K GROUP A PARCEL 3, 4, 8 & 14  
ADDRESS: TESLA BLVD  
DEED REFERENCE: DEED BK 2723 PG 828  
PLAT REFERENCE: PB 36(1B)  
APPROVED BY: D. HURST  
DRAWN BY: P. BLAKE  
FIELD DATE: 04-01-2024  
DRAWING DATE: 04-02-2024  
LAST REV. DATE: 07-26-2024  
SCALE: 1" = 100'  
PROJECT NUMBER: 24065

4637 B

# TENNESSEE COUNTY MAP



## 3N.B.R. Service Area Demographic Chart

**Table 3N.B.R.: Covenant Health ODC  
Demographic Characteristics of Tennessee Service Area  
2026-2030**

Service Area County	Tennessee State Data Center							Census Bureau				TennCare	
	Total Population- Current Year 2026	Total Population- Projected Year 2030	Total Population- % Change	*Target Population- Age 20+ Current Year 2026	Target Population - Age 20+ Projected Year 2030	Target Population- % Change	Target Population Projected Year as % of Total	Median Age	Median Household Income	Person Below Poverty Level*	Person Below Poverty Level as % of Total	TennCare Enrollees	TennCare Enrollees as % of Total
<b>Blount County</b>	145,681	150,249	3.1%	114,345	118,067	3.3%	78.6%	44.5	\$77,365	13,403	9.2%	20,405	14.0%
<b>State of TN Total</b>	7,300,003	7,513,757	2.9%	5,541,590	5,705,973	3.0%	75.9%	39.5	\$69,595	985,500	13.5%	1,391,250	19.1%

*Sources: Tennessee State Data Center Population Projections, 2026-2030; U.S. Census Bureau, QuickFacts; TennCare Bureau (December 2025 enrollment data)*

\* The Census Bureau website does not provide the number of persons below the poverty level. The totals in this column are calculated by applying the poverty percentage provided by the Census Bureau to the population totals from the Tennessee State Data Center.

## Attachment 5N: Service Area MRI Utilization

<b>Table: Service Area Health Care Providers that Utilize MRI's – 2024</b>							
<b>County</b>	<b>Provider Type</b>	<b>Provider</b>	<b>Year</b>	<b>No. of Units</b>	<b>Mobile/Fixed</b>	<b>Total Procedures</b>	<b>Average Procedures Per Unit</b>
Blount	HOSP	Blount Memorial Hospital	2024	1	Fixed	6,468	6,468
Blount	PO	East Tennessee Medical Group	2024	1	Fixed	4,248	4,248
<b>Total:</b>			2024	2	Fixed	10,716	5,358

<b>Table: Service Area Health Care Providers that Utilize MRI's – 2023</b>							
<b>County</b>	<b>Provider Type</b>	<b>Provider</b>	<b>Year</b>	<b>No. of Units</b>	<b>Mobile/Fixed</b>	<b>Total Procedures</b>	<b>Average Procedures Per Unit</b>
Blount	HOSP	Blount Memorial Hospital	2023	1	Fixed	6,396	6,396
Blount	PO	East Tennessee Medical Group	2023	1	Fixed	4,677	4,677
<b>Total:</b>			2023	2	Fixed	11,073	5,537

<b>Table: Service Area Health Care Providers that Utilize MRI's – 2022</b>							
<b>County</b>	<b>Provider Type</b>	<b>Provider</b>	<b>Year</b>	<b>No. of Units</b>	<b>Mobile/Fixed</b>	<b>Total Procedures</b>	<b>Average Procedures Per Unit</b>
Blount	HOSP	Blount Memorial Hospital	2022	1	Fixed	5,950	5,950
Blount	PO	East Tennessee Medical Group	2022	1	Fixed	4,164	4,164
<b>Total:</b>			2022	2	Fixed	10,114	5,057

**Item 6N - Applicant Projected Utilization (Year 1 and Year 2)****Year 1 (2028)**

ODC Facility Name	# MRI Units	# CT Units	# X-Ray Units	# Ultrasound Units	# Mammography Units
Blount County ODC	1	1	1	1	1

Year 1 (2028)	ODC Facility Name	Facility ID	County	MRI Patients	MRI Proced	CT Patients	CT Procedures	Ultrasound Patients	Ultrasound Procedures	X-Ray Patients	X-Ray Procedures	Mammography Patients	Mammography Procedures	Total Procedures	Total Patients
CY 2028	Blount County ODC		Blount	2,014	2,393	1,807	2,018	1,664	1,827	2,902	3,520	2,675	2,676	12,434	11,062

Year 2 (2029)	ODC Facility Name	Facility ID	County	MRI Patients	MRI Proced	CT Patients	CT Procedures	Ultrasound Patients	Ultrasound Procedures	X-Ray Patients	X-Ray Procedures	Mammography Patients	Mammography Procedures	Total Procedures	Total Patients
CY 2029	Blount County ODC		Blount	2,328	2,766	2,959	3,304	2,528	2,776	4,851	5,884	4,000	4,002	18,733	16,667

\* Bone Density is included in X-Ray Procedures.

### Attachment 9C: Gross Charges of Service Area MRI Providers

**Table: Service Area Health Care Providers that Utilize MRI's – 2023**

County	Provider Type	Provider	Year	No. of Units	Mobile/Fixed	Total Procedures	Total Gross Charges Reported	Average Gross Charge Per Procedure
Blount	HOSP	Blount Memorial Hospital	2023	1	Fixed	6,396	\$41,884,227	\$6,549.00
Blount	PO	East Tennessee Medical Group	2023	1	Fixed	4,677	\$17,561,362	\$3,755.00
<b>Totals</b>				2		11,073	\$59,445,589	\$5,368.52

**Table: Service Area Health Care Providers that Utilize MRI's – 2022**

County	Provider Type	Provider	Year	No. of Units	Mobile/Fixed	Total Procedures	Total Gross Charges Reported	Average Gross Charge Per Procedure
Blount	HOSP	Blount Memorial Hospital	2022	1	Fixed	5,950	\$41,783,372	\$7,022.42
Blount	PO	East Tennessee Medical Group	2022	1	Fixed	4,164	\$14,610,647	\$3,508.80
<b>Totals</b>				2		10,114	\$56,394,019	\$5,575.84

**Table: Service Area Health Care Providers that Utilize MRI's – 2021**

<b>County</b>	<b>Provider Type</b>	<b>Provider</b>	<b>Year</b>	<b>No. of Units</b>	<b>Mobile/Fixed</b>	<b>Total Procedures</b>	<b>Total Gross Charges Reported</b>	<b>Average Gross Charge Per Procedure</b>
Blount	HOSP	Blount Memorial Hospital	2021	1	Fixed	5,382	\$43,633,017	\$8,107.21
Blount	PO	East Tennessee Medical Group	2021	1	Fixed	4,243	\$13,980,674	\$3,295.00
<b>Totals</b>				2		9,625	\$57,613,691	\$5,985.84

**ENSURE REQUISITION/PURCHASE ORDER IS ISSUED TO:  
 GE PRECISION HEALTHCARE  
 TAX ID (83-0849145)**

Covenant Diagnostic Center South  
 7625 Chapman Hwy  
 Knoxville, TN 37920-2351

This Agreement (as defined below) is by and between the Customer and the GE HealthCare business (“GE HealthCare”), 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”). “Agreement” is this Quotation (including line/catalog details included herein) 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.

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:	Vizient Supply LLC
Terms of Delivery	FOB Destination
Billing Terms	80% on Delivery / 20% on Acceptance
Payment Terms	45 Net
Sales and Use Tax Exemption	No Certificate on File
Total Quote Net Selling Price	\$1,670,220.04

**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                       GE HFS Lease

Other Financing Loan               Other Financing 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.

Covenant Diagnostic Center South

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_

**Purchase Order Number, if applicable**

GE Precision HealthCare LLC

**Signature:** Stetson Moore

**Title:** Account Manager, IMG

**Date:** November 18, 2025

**Document Instructions**

Please sign and return this quotation together with any Purchase Order(s) to:  
**Name:** Stetson Moore

**Email:** stetson.moore@gehealthcare.com

**Phone:** +1 8657196891

**Fax:**

**Payment Instructions**

Please **remit** payment for invoices associated with this quotation to:

**GE Precision Healthcare LLC**  
**P.O. Box 96483**  
**Chicago, IL 60693**

**FEIN: 83-0849145**

**Covenant Diagnostic Center South**

**Addresses:**

<b>Bill To:</b>	Covenant Diagnostic Center South	7625 Chapman Hwy, Knoxville, TN, US, 37920-2351
<b>Ship To:</b>	Covenant Diagnostic Center South	7625 Chapman Hwy, Knoxville, TN, US, 37920-2351

**To Accept This Quotation**

- Please sign the quote and any included attachments (where requested).
- Source of Funds (choice of Cash/Third Party Loan 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).
- If your purchasing process requires a purchase order, please make sure it includes:
  - 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

Evidence of the agreement to contract terms. Either: (a) the quotation signature filled out with signature and P.O. number; or (b) Verbiage on the purchase order stating 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 # \_\_\_\_\_”.

## Purchases

Line	Qty	Catalog	
1.	1.00	S7530NR	<b>SIGNA™ Voyager 1.5T 30.3 49ch</b>

The SIGNA™ Voyager MR30 1.5T 70cm wide-bore magnetic resonance system is designed to enable you to deliver both clinical excellence and operational efficiency while addressing the cost of ownership for 1.5T wide-bore technology. With SIGNA™ Voyager simplify and accelerate the scanning process from set-up to acquisition to post-processing for your technical staff, with access to an extensive range of clinical imaging and advanced visualization capability for your clinicians.

The SIGNA™ system comprises the foundation system electronics and collector kits, calibration phantoms, LCD monitor as well as the core RF coil suite. This enhanced edition of SIGNA™ Voyager also provides supplementary advanced applications that further extend clinical capability and performance.

- RF Coil Suite: TDI PA and TDI HNU
- SIGNA™Works Clinical Toolkit Extensions
- SIGNA™Works Advanced Recon, Acceleration, Applications

### TOTAL DIGITAL IMAGING and RF COIL SUITE

SIGNA™ Voyager features the Total Digital Imaging RF-architecture with a 49-channel configuration for this offering. The SIGNA™ Voyager core coil suite is designed to enhance patient comfort and image quality while simplifying workflow, and comprises:

- (1) TDI Posterior Array
- (1) TDI Head-Neck Unit

The TDI Posterior Array is embedded in the patient table (sold separately) and can be used in conjunction with the HNU (included) and the AIR™ or TDI Anterior Array (both sold separately). The system will automatically select the appropriate subset of coil elements based on the prescribed FOV and is invisible to additional surface coils placed directly on top of the table. The TDI PA supports whole-body imaging and parallel imaging in 3 directions.

- Elements: 32
- Length: 120.5 cm; Width: 48.6 cm
- S/I coverage: 113 cm
- Parallel imaging in all three scan planes

The TDI Head and Neck Unit comprises a baseplate and anatomically optimized Neuro-vascular and Open-face array adapters. The upper end of the HNU can be elevated to enhance patient comfort and access. The TDI HNU is designed to be used in conjunction with the TDI Posterior Array (included) and the Anterior Array (sold separately).

- Elements: up to 24 combined with TDI PA and TDI AA
- Length: 53 cm; Width: 35 cm
- Height with NV Array: 35 cm
- Height with Open Array: 25.7 cm
- Parallel imaging in all three scan planes

### SIGNA™Works CLINICAL TOOLKIT EXTENSIONS

The SIGNA™Works clinical imaging tools are organized and optimized to address six clinical work areas: NeuroWorks, OrthoWorks, BodyWorks, OncoWorks, CVWorks and PaedWorks. This offering of SIGNA™ Voyager extends the clinical utility and performance of these core toolkits with:

- eDWI enhanced diffusion with Multi-B value and SmartNEX
- DTI diffusion tensor imaging
- FiberTrak post-processing for diffusion tensor to display white matter tracking
- 3D SWAN 2.0 GRE-based multi-echo susceptibility imaging including phase image
- Inhance 2.0 non-contrast MRA suite (3D velocity, 2D inflow, inflow IR, and Deltaflow)
- TRICKS dynamic contrast enhanced, multiphase 3D MRA
- MAVRIC SL 3D FSE-based spectral imaging for MR-Conditional implants
- CartiGram T2 cartilage mapping
- IDEAL FSE 3-point Dixon fat-water separation

- Flex 2-point Dixon fat-water separation for 2D FSE, 3D Cube and GRE
- Cine IR fast gradient echo with IR-prep pulse
- 2D PS MDE phase sensitive tissue characterization with wide bandwidth suppression and single-shot
- Black Blood SSFSE single-shot FSE-based imaging with double IR and triple IR
- StarMap iron assessment for liver and heart (acquisition)

#### SIGNA™Works ADVANCED ACCELERATION and APPLICATIONS

SIGNA™Works innovations are designed to enable you to expand your imaging services and deliver on the most complex exams for the most challenging patients with both clinical excellence and efficiency. This offering of SIGNA™ Voyager delivers deep-learning based workflow as well as time course cardiac imaging and motion reduction.

- 2D AIR™ Recon DL Reconstruction
- AIRx™ Auto Graphic Prescription
- Cardiac Time Course Imaging
- 3D PROMO Prospective Motion Correction

#### AIR™ Recon DL

AIR™ Recon DL is a deep-learning based reconstruction algorithm applied to the raw scan data to improve SNR and image sharpness. This propriety technique improves image quality at the foundational level by removing image noise and ringing artifacts while enabling shorter scan times. With AIR™ Recon DL:

- Remove noise in images through trained deep learning algorithms
- Enhance productivity by enabling shorter scan times
- Eliminate Gibbs and truncation artifacts with intelligent ringing suppression
- Deliver sharper, clearer and accurate MR images
- Apply a tailored level of AIR™ Recon DL based on preference
- Visualize AIR™ Recon DL images directly at the MR console without reconstruction delays

This configuration provides the 2D suite of AIR™ Recon DL capability and requires the MR30 software platform (sold separately) and the Gen7 DL image reconstruction computer (sold separately).

- AIR™ Recon DL 2D
- AIR™ Recon DL 2D PROPELLER

#### AIRx™ Auto Graphic Prescription

Change the way you prescribe brain and knee exams. AIR x™ Auto Graphic Prescription uses deep learning algorithms, instead of an atlas-based method, to identify anatomical structures and prescribe slices locations for brain and knee exams. As a result of the deep learning algorithms, AIRx™ automatically adapts slice prescriptions to various patient anatomies and structures to enable consistency and productivity for slice positioning from technologist to technologist, patient to patient and the same patient overtime.

#### Time Course Cardiac Imaging

FGRE Time Course adds an additional tool to the CVWorks toolkit for first pass imaging.

#### 3D PROMO Motion Correction

Correct for motion prospectively on 3D imaging. 3D PROMO prospective motion correction uses a real-time 3D navigator-based technique to correct for motion, and is compatible with 3D Cube T2W, DIR and T2 FLAIR contrasts.

#### SIGNA™Works ADVANCED RECON AND APPLICATIONS

- Cine IR FGRE-based cine imaging with IR-prep pulse

#### 3D PROMO Motion Correction

Correct for motion prospectively on 3D imaging. 3D PROMO prospective motion correction uses a real-time 3D navigator-based technique to correct for motion, and is compatible with 3D Cube T2W, DIR and T2 FLAIR contrasts.

PLEASE NOTE: The SIGNA™ Voyager system comprises several essential elements that are described and quoted separately. These elements include:

- SIGNA™ Voyager Magnet, RF, and Gradient Assembly
- SIGNA™Works MR30 Software and Clinical Applications Toolkits
- Host PC and Operator Console (GOC)
- Image Reconstruction Computer (ICN)
- eXpress Detachable or Comfort Plus Patient Table
- AIR™ or TDI Anterior Array Surface Coil

Line	Qty	Catalog	
<b>2.</b>	<b>1.00</b>	<b>S7530TB</b>	<b>Voyager Fixed Table and Wired Gating</b>

SIGNA™ Voyager offers a fully integrated Comfort Plus fixed patient table (also known as TDI patient table), to help improve exam efficiency, and patient comfort. The Comfort Plus patient table can be lowered to a very low height to facilitate transfer of wheelchair patients. The cradle width has also been increased by ~30% from previous generations to enable a more comfortable experience for patients.

- Maximum patient weight for scanning: 550 lbs
- Maximum patient weight for lift: 550 lbs
- Automated vertical and longitudinal power drive
- Fast longitudinal speed: 25 cm/sec
- Slow longitudinal speed: 1.9 cm/sec
- IntelliTouch & laser land-marking
- Laser alignment land-marking

Line	Qty	Catalog	
<b>3.</b>	<b>1.00</b>	<b>M6006FD</b>	<b>SIGNA Voyager 1.5T IPM Magnet for Fixed Table</b>

The magnet, RF-architecture and gradient technology on SIGNA™ Voyager are designed to deliver the signal-to-noise, dynamic range, spatial resolution, and temporal resolution performance needed to enable demanding clinical applications with exceptional image quality and operational excellence.

#### TECHNOLOGY FOUNDATION

- Magnet and Enclosures
- TDI RF-Receive Technology
- UHE with IGC Gradient
- Quite Acoustic Reduction Technology

#### MAGNET and ENCLOSURES

To improve the patient experience and provide high image quality, no other component of an MRI system has greater impact than the magnet. The SIGNA Voyager 1.5T system features a wide bore magnet that delivers a large field of view and a robust fat saturation required for abdominal, breast and off-centered FOV musculoskeletal imaging. The magnet geometry has been optimized to reduce patient anxiety by providing more space in the bore and more exams with the patient's head outside of the magnet. The 50 x 50 x 50 cm field of view provides uniform image quality and can reduce exam times since fewer acquisitions may be necessary to cover large areas of anatomy. Complemented by GE's active shielding technology, the SIGNA Voyager has very flexible installation specifications to provide easy siting. And with zero-boil-off magnet technology, helium refills are effectively eliminated even during installation, thus reducing operating costs and maximizing uptime.

- Manufactured by GE Healthcare.
- Operating field strength 1.5T (63.86 MHz).
- Active magnet shielding
- Zero boil-off Cryogenics
- Magnet length 174cm
- Magnet Weight 7,275 lbs (3,300 kg)
- Patient Aperture 74 cm
- Patient Bore Diameter 70cm

- Patient Bore Length 163cm
- Maximum Field of View (x,y,z) 50 cm x 50 cm x 50 cm

Magnet Homogeneity: Typical ppm and Guaranteed ppm shown.

- 10cm DSV 0.007 and 0.02
- 20cm DSV 0.035 and 0.06
- 30cm DSV 0.10 and 0.15
- 40cm DSV 0.33 and 0.43
- 45cm DSV 0.88 and 1.0
- 48cm DSV 1.75 and 2.0
- 50cm DSV 2.8 and 3.3

DSV = Diameter Spherical Volume.

Fringe field (axial x radial):

- 5 Gauss = 4.0 m x 2.5 m
- 1 Gauss = 5.8 m x 3.2 m

Touch screen Dual In-Room Displays (IRD)

By consolidating all controls into one place, the Dual In-Room Displays (IRD) provides real-time feedback to the operator to improve exam room efficiency. With an in-room display monitor available at either side of the magnet as standard, the technologist always has all the control he needs at his fingertips, irrespective of which side he is operating from. Further touch-screen capability makes the controls even more intuitive and easy to use. The display provides real time interaction with the scanner and the host computer. The user has direct control or selection of the following:

- Display of patient name, ID, study description
- Display and entry of patient weight
- Display and entry of patient orientation and patient position
- Cardiac waveform display and ECG/EKG lead confirmation with gating control: trigger select, invert and reset
- Respiratory waveform display

With AIR Touch™, you simply use IntelliTouch™, GE's 1-touch landmarking tool, to activate an optimized set of coils that is selected based on the patient's anatomy. This advanced technology selects from unlimited coil combinations such as the posterior array (PA) and flexible coils, to efficiently set up patients.

- AutoStart – initiate the scanner to automatically acquire, process, and network images
- Display connected coils and coil status
- Display of table location and scan time remaining
- Screen saver
- Control multiple levels of in-bore ventilation and lighting

TOTAL DIGITAL IMAGING

SIGNA™ Voyager features the Total Digital Imaging RF-architecture with a 33-channel configuration. The TDI RF-architecture uses a Direct Digital Interface (DDI) to convert the signal from each coil element to a digitized signal (there is no mixing of signal from multiple elements to the same digitizer) to deliver high signal, low noise with extended dynamic range or gray-scale capability. In addition, the TDI RF-architecture enables the capability to simultaneously acquire the MR signal from the integrated body coil and the high-density surface coil using Digital Surround Technology. The superior SNR and sensitivity of the high-density surface coil is then combined with the superior homogeneity and deeper signal penetration of the integrated body coil to deliver enhanced spine and body imaging.

- 33ch Total Digital Imaging (TDI)
- Direct Digital Interface (DDI)
- Digital Surround Technology (DST)

UHE with IGC GRADIENT TECHNOLOGY and QUIET TECHNOLOGY

SIGNA™ Voyager introduces the Ultra High Efficiency (UHE) gradient system with Intelligent Gradient Control technology (IGC). IGC

gradient driver employs a digital control system that utilizes predictive models of the electrical and thermal characteristics of the gradient coil to maximize performance. As a result, SIGNA™ Voyager delivers exceptional minimum TR and TE capability while reducing power consumption. The gradient coil and the RF body coil are integrated into a single module which is water and air-cooled for optimum duty-cycle performance and patient comfort. In addition, the gradients are non-resonant and actively shielded to minimize eddy currents to deliver high fidelity, accuracy and reproducibility over a large FOV.

- Peak amplitude performance: 36 mT/m
- Up to 150 T/m/s instantaneous peak slew rate performance
- Maximum FOV: 50 cm x 50 cm x 50 cm
- Duty Cycle: 100%

#### ACOUSTIC REDUCTION TECHNOLOGY

GE has implemented Quiet Technology on critical components of the SIGNA MR system to reduce acoustic noise and improve the patient environment. This technology enables full use of the UHE Gradient Platform for excellent image quality, while maintaining a safe environment for the patient. The technology encompasses the gradient coil, RF body coil, and magnet mounting. Quiet acoustic reduction uses 5 levels of isolation, dampening and gradient optimization technology to mitigate vibration and mute sound.

- Gradient & RF coil isolation – isolates the resonance module from the magnet
- Vibro-acoustic isolation – isolates the magnet from the building
- Mass-damped acoustic barriers – further mutes sound
- Gradient waveform optimization – user selectable

Line	Qty	Catalog	
<b>4.</b>	<b>1.00</b>	<b>M70103AE</b>	<b>SIGNA Voyager MR30.3 Software and Tech Pubs</b>

MR30 for SIGNA™ delivers the foundational operating software, pulse sequence families, clinical applications toolkits, and visualization toolkits as well as acceleration and motion correction tools. MR30 for SIGNA™ software features several new enhancements that improve Exam, Patient Setup and Scanning workflows.

MR30 for SIGNA™ is the latest platform software to bring the highest performance to SIGNA™ MR. MR30 introduces several base security, workflow and image quality enhancements, as well as enabling GE Healthcare’s the latest innovations in Deep Learning Reconstruction\*. Each scanner running MR30 Platform will enjoy industry-leading cybersecurity features\* by upgrade to Secure Scientific Linux (SLES 15), enabling the latest features for securing the scanner against bad actors and other threats for years to come. MR30 software brings in additional workflow efficiency, including a new Window Width/Window Level feature that applies consistent levels across all images in the database; simplified setup for Automatic Phase Correction; an improved phase correction algorithm for LAVA FLEX\* images and a Motion Compensation option when using Cardiac T1-Mapping applications such as FIESTA. The system will also now support a system preference to set the orientation of axial Breast images. Systems already equipped with HyperSense\* will see the feature expanded to support SWAN and Contrast Enhanced MRA applications. The MR30 for SIGNA™ software release brings AIR™ Recon DL\* 3D, motion-insensitive PROPELLER and a host of additional applications such as DTI, FSE Flex, CartiGram, as well as phase sensitive MDE and MoCo MOLLI T1 mapping for cardiac imaging.

(\* indicated applications may be purchasable options for certain regions and systems)

The latest enhancements include several key improvements to Exam, Patient Setup and Scanning workflows:

- Split Exam create/assign separate exam number for a sub-set of series
- AIR™ Recon smart algorithm for brain, MSK, body, cardiac, PROPELLER MB and FOCUS DWI imaging
- Whole-Body automated multi-station localizer and auto pasting
- Whole-Body automated multi-station FSE-IR, 3D SPGR and DWI imaging
- SnapShot SSFSE multi-slice per breath-hold imaging
- Cube flexibility for modifying/reducing scan time
- Dynamic phase correction for FSE imaging
- Uniformity optimization for large FOV body diffusion
- Flexible ZIP allows for flexible resolution by percentage to enhance the sharpness while decreasing the scan time

#### EXPRESS EXAM WORKFLOW

MR30 for SIGNA™ workflow tools comprise the modality worklist, protocol libraries, workflow manager, auto-functions, inline

viewing and inline processing. Together these tools are designed to help change the way you work by simplifying and accelerating the scanning process from set-up to acquisition to post-processing. With MR30, workflow can begin before the patient enters the magnet room and exams can be completed with a few mouse clicks delivering quality and consistency for all patients and from all technologists. At the same time, MR30 workflow maintains the flexibility needed to rapidly adapt and optimize exams for specific patient situations.

MR30 Workflow delivers new capabilities that speed set-ups for all exams and streamline scanning for multi-station and combination exams. With MR30 Workflow, scan set-up starts with Modality Worklist, an automated method to obtain patient, exam and protocol information from a DICOM work-list server. For sites with full DICOM connectivity, once a patient has been selected from the Modality Worklist, the In-Room Operator Console will automatically highlight the relevant exam details. The Modality Worklist enables complete control of the MR protocol prescription, but also reduces work by allowing the MR protocol to be selected and linked to the patient record in advance of the patient's arrival.

Protocol Tools enable exam automation while also giving the user complete control of protocols for prescription, saving, searching, and sharing. Protocols are organized in two libraries: GE Optimized (preloaded protocols) and Site Authored (customized and saved). Protocols can be saved based on patient demographics, anatomy, scan type, or identification number for rapid search and selection. Commonly used protocols can be flagged as favorites for quick selection from the Modality Worklist.

In addition to pre-programmed protocols, ProtoCopy enables a complete exam protocol to be shared with the click of a mouse. GE protocols provided with the system include Protocol Notes designed to guide the user through the procedure. For special applications, Protocol Notes also include video guides with step-by-step video-based demonstration and instruction. Protocol Notes can be edited by the user to reflect protocol modifications to aid communication among users.

With the patient positioned, IntelliTouch and AIR Touch™ together simplify coil selection to one touch and one click. AIR Touch™ automatically determines coil element locations based on the IntelliTouch landmark and intelligently generates the coil configuration with elements activated to optimize image quality for coverage, uniformity, and parallel imaging acceleration factor.

At the console, the MR30 WorkFlow Manager implements the selected protocol. The Workflow Manager controls location prescription, acquisition, processing, visualization, and networking, and can fully automate these steps, if requested by the user. Once the target anatomy has been prescribed, the Linking feature can be used to translate appropriate parameters to all subsequent series that have been linked, eliminating the need for further action by the user.

When selected, AutoStart will automatically initiate the localizer, coil selection, series-to-series scanning, multi-station scanning, prescription of scan plans for brain exams, as well as delivered instructions to the patient.

- Pause and Resume allows the user to pause a scan in progress (even in automated mode), to respond to a patient need, and then resume mid-scan without starting the scan over.
- For breath-hold scanning, Auto Protocol Optimization provides automated alternative choices for spatial resolution and breath-hold time based on the original protocol. Technologists are liberated from troublesome scan time and image quality adjustments by selecting from pre-calculated options determined by the system.
- Whole Body Localizer automates the acquisition and pasting of multi-station scans for planning, and Whole-Body Imaging enables automated multi-station scanning with FSE-IR, 3D SPGR and DWI diffusion contrasts.
- Once scanning and processing are complete, Split Exam provides the capability to extract a subset of series from multi-station and combination exams to create/assign a separate exam number for accession numbers in billing and PACS systems.

Inline Processing automatically completes post-processing steps for the user after the images have been reconstructed and saved into the database. For certain tasks, such as vascular segmentation, the user must accept the results, or complete additional steps prior to saving the images to the database. These automated processing steps can be saved to the (scan) protocol to ensure consistent output and workflow:

- Diffusion weighted series: automatic compute and save
- Diffusion tensor series: automatic compute and save
- eDWI: automatic compute and save
- Image filtering: automatic compute and save
- Maximum/Minimum Intensity Projection: automatic compute and save
- Pasting: automatic compute and save
- Reformat to orthogonal plane: automatic compute and save
- T2 map for cartilage: automatic compute and save
- 3D Volume Viewer: automatic load

- Image Fusion: automatic load
- Interactive Vascular Imaging: automatic load
- FiberTrak: automatic load
- Spectroscopy: automatic load

#### MR30 for SIGNA™ TECHNOLOGIES

The acceleration, motion correction and tissue suppression technologies in MR30 for SIGNA™ are designed to address overall workflow, rescans and scan time as well as the impact of challenging patients, challenging anatomy and challenging physiology.

#### Acceleration Technology

MR30 for SIGNA™ delivers a suite of acceleration techniques designed to help address acquisition time.

- Smart Algorithm AIR™ Recon uses a smart reconstruction algorithm to address background noise and artifacts enabling enhanced image quality without the need for longer scan times and is compatible with critical imaging sequences including PROPELLER MB, 3D Cube, and FSE.
- ARC parallel imaging reduces scan time by using an adaptive auto-calibrating (data-driven) technique to selectively acquire data. As a result, ARC enables smaller FOV prescription with less sensitivity to motion and coil calibration artifacts.
- ASSET parallel imaging reduces scan time using an array spatial sensitivity (image driven) technique. ASSET takes advantage of the data produced by the multiple coil elements to reduce the total data needed to create an image.
- Flexible No Phase Wrap reduces scan time by reducing the number of increments acquired to address wrap-around based on a flexible user-selectable factor.
- Fraction NEX reduces scan time by reducing the number of data averages.

#### Motion Correction Technology

Enable free-breathing body exams and address the effects of motion with patient-adaptive technologies that proactively detect and correct for motion without hardware dependencies or the need for user intervention.

- Auto Body Navigators deliver real-time, respiratory motion compensated imaging for a broad range of sequences, including T1w dynamic contrast-enhanced imaging. Auto Body Navigators use a software-based tracking pulse that is automatically placed for the user and allows on-the-fly adjustment to adapt to challenging patient circumstances, again without the need for hardware.
- PROPELLER MB combines radial acquisition and motion correction post-processing to mitigate the effects of motion without the need to position the patient over a sensor. PROPELLER MB can be used to generate T1, T2, PD, T1 FLAIR, and T2 FLAIR contrasts and is compatible with Auto Body Navigators to enable usage for a broad range of exams. With MR30 for SIGNA™, PROPELLER MB motion correction benefits from AIR™ Recon smart algorithm image quality.

#### Tissue Suppression Technology

Modify the contribution of fat or water signal with multiple tissue suppression techniques.

- FatSat uses a frequency selective pulse to target and suppress the signal from fat
- WaterSat frequency selective water suppression
- STIR inversion pulse fat or water suppression
- SPECIAL frequency selective fat suppression
- ASPIR spectrally selective fat suppression
- Flex 2-point Dixon techniques to separate fat and water signals

#### MR30 for SIGNA™ CLINICAL APPLICATIONS

MR30 for SIGNA™ clinical imaging tools are organized and optimized to address six clinical work areas: NeuroWorks, OrthoWorks, BodyWorks, OncoWorks, CVWorks and PaedWorks. Each clinical toolkit comprises pre-programmed protocols, clinical applications and visualization tools designed for the challenges of each imaging area. The resulting capability starts with simplified prescription and protocol set-up. Imaging capability extends to patient management and clinical workflow enhancements. Post-processing capability augments the portfolio with specialized tools designed to speed the review and processing tasks typically performed.

#### NeuroWorks Toolkit

- READYBrain auto-align for automated brain exam prescription

- PROPELLER MB motion robust radial-FSE with T1, PD, T2, T2 FLAIR, T1 FLAIR with STIR and ASPIR
- PROPELLER DW Duo FSE-based diffusion with susceptibility reduction
- 3D Cube 2.0 FSE-based imaging with T1, T2, T1 FLAIR, T2 FLAIR and STIR
- 3D Cube Dual Inversion Recovery for gray or white matter nulling
- 3D COSMIC modified steady state imaging
- 2D/3D MERGE T2\* multi-echo fast gradient echo imaging
- 3D BRAVO IR prepared fast SPGR imaging with concentric k-space filling
- 3D MP-RAGE IR prepared fast SPGR imaging with sequential k-space filling
- 3D FIESTA and 3D FIESTA-C fast steady state imaging
- PSIR – Phase Sensitive Inversion Recovery
- BrainStat GVF and AIF parametric maps
- READYView and BrainView post-processing which include time series, DWI/ADC maps, DTI, variable echo, BOLD, and spectroscopy (SV, 2D, 3D)

#### OrthoWorks Toolkit

- FSE and frFSE fast spin echo imaging suites with dynamic phase correction
- High Bandwidth distortion reduction for FSE
- FatSat, STIR, SPECIAL, ASPIR, Spectral Spatial fat-suppression tools
- MARS High Bandwidth distortion reduction for FSE
- PROPELLER MB motion robust radial FSE with T1, PD, T2 and Fat Suppression (STIR and ASPIR)
- 3D Cube 2.0 FSE-based imaging with T1, T2, and STIR
- 3D COSMIC modified steady state imaging
- 2D/3D MERGE T2\* multi-echo fast gradient echo imaging
- 3D MENSA NERVE for optimized nerve contrast
- READYView post-processing

#### BodyWorks Toolkit

- Auto Navigators diaphragm tracker for free-breathing scanning
- PROPELLER MB motion robust radial FSE with T1 and Fat Suppression (STIR and ASPIR)
- 3D Cube FSE-based imaging with T1, T2, and STIR
- 3D Dual Echo gradient echo in/out phase imaging
- 3D LAVA and Turbo LAVA with Turbo ARC and SPECIAL for dynamic or single-phase imaging (breath-hold or free-breathing)
- 3D MRCP frFSE imaging
- 2D Fat Sat FIESTA fast steady state imaging
- Enhanced SSFSE Snapshot multi-slice imaging
- Whole-Body multi-station localizer and pasting
- Whole-Body multi-station FSE-IR, 3D SPGR and DWI imaging
- Multiphase DynaPlan
- SmartPrep automated bolus detection
- Fluoro Trigger real-time bolus monitoring

#### OncoWorks Toolkit

- Auto Navigators diaphragm tracker for free-breathing scanning
- PROPELLER MB motion robust radial-FSE with T1, PD, T2, T2 FLAIR, T1 FLAIR with STIR and ASPIR
- PROPELLER DW Duo FSE-based diffusion imaging with susceptibility reduction
- 3D Cube 2.0 FSE-based imaging with T1, T2, T1 FLAIR, T2 FLAIR and STIR
- 3D Cube Dual Inversion Recovery for gray or while matter nulling
- 3D BRAVO IR prepared fast SPGR imaging with concentric k-space filling
- 3D MP-RAGE IR prepared fast SPGR imaging with sequential k-space filling
- Enhanced SSFSE Snapshot multi-slice imaging
- Whole-Body multi-station localizer and pasting
- Whole-Body multi-station FSE-IR, 3D SPGR and DWI imaging
- 3D LAVA and Turbo LAVA with Turbo ARC and SPECIAL for dynamic or single-phase imaging (breath-hold or free-breathing)
- Multiphase DynaPlan
- SmartPrep automated bolus detection
- Fluoro Trigger real-time bolus monitoring
- READYView, BrainView and BodyView post-processing

**CVWorks Toolkit**

- Auto Navigators diaphragm tracker for free-breathing scanning
- iDrive for free breathing cardiac planning
- 2D FIESTA Cine gated steady-state, multi-phase imaging
- 3D FS FIESTA steady-state imaging with Fat Sat
- 2D/3D Time-Of-Flight & 2D Gated Time-of-Flight
- 2D/3D Phase Contrast & Phase Contrast Cine
- SmartPrep automated bolus detection
- Fluoro Trigger real-time bolus monitoring
- 3D QuickStep automated multi-station imaging
- READYView post-processing

**PaedWorks Toolkit**

- PROPELLER MB motion robust radial-FSE with T1, PD, T2, T2 FLAIR, T1 FLAIR with STIR and ASPIR
- 3D Cube 2.0 FSE-based imaging with T1, T2, T1 FLAIR, T2 FLAIR and STIR
- 3D Cube Dual Inversion Recovery for gray or white matter nulling
- 3D COSMIC modified steady state imaging
- 2D/3D MERGE T2\* multi-echo fast gradient echo imaging
- 3D BRAVO IR prepared fast SPGR imaging with concentric k-space filling
- 3D MP-RAGE IR prepared fast SPGR imaging with sequential k-space filling
- 3D FIESTA and 3D FIESTA-C fast steady state imaging
- Auto Navigators diaphragm tracker free-breathing scanning
- 3D LAVA and Turbo LAVA with Turbo ARC and SPECIAL for dynamic or single-phase imaging (breath-hold or free-breathing)
- 3D LAVA GRE 2-point Dixon fat-water separation for dynamic or single-phase imaging (breath-hold or free-breathing)
- Enhanced SSFSE Snapshot multi-slice imaging
- BrainStat GVF and AIF parametric maps
- READYView and BrainView post-processing

**READYView Advanced Visualization**

READYView is an MR30 advanced visualization tool designed to simplify the quantitative analyses of multiple data sets. READYView automatically selects the most relevant post-processing protocol for the user and provides guided workflow and general assistance for the processing algorithms. In addition, the user can customize workflows with adjustable layouts, personalized parameter settings and custom review steps. Key capabilities of READYView include the ability to analyze, export and save:

- Time series
- Diffusion weighted series
- Diffusion tensor series
- Variable echo series
- Blood oxygen level dependent (BOLD) series fMRI processing
- Spectroscopy data (single voxel and 2D or 3D CSI)
- MR Touch (MR elastography) series

Line	Qty	Catalog	
<b>5.</b>	<b>1.00</b>	<b>M75028ED</b>	<b>SIGNA MR30.3 eDelivery item - Voyager</b>

Software eDelivery is used to associate the MRI scanner with GE HealthCare’s remote software delivery infrastructure. No items are being delivered physically or electronically. (For tracking purpose only – non purchasable catalog)

Line	Qty	Catalog	
<b>6.</b>	<b>1.00</b>	<b>M70072HL</b>	<b>Host Computer GOC - HP Z4 with 8.4" IRD - US</b>

The SIGNA™Works AIR™ IQ Edition computing platform utilizes a parallel, multi-processor design to enable simultaneous scanning, reconstruction, filming, post-processing, archiving and networking.

The host PC operates on the Scientific Linux operating system and utilizes a single tower configuration. The computing platform also includes an LCD monitor.

SIGNA™ generates MR Image, Secondary Capture, Structured Report, and Gray Scale Softcopy Presentation State DICOM objects. The DICOM networking supports both send and query retrieve as well as send with storage commit to integrate with PACS archive. Please refer to the DICOM Compliance Statement for details.

Line	Qty	Catalog	
<b>7.</b>	<b>1.00</b>	<b>M7083MX</b>	<b>Gen 8 DL Reconstruction Engine and DICOM Conformance</b>

Reconstruction performance today is challenged by explosive growth in data, and increased computational complexity. The amount of data to be stored and processed continues to increase with the advances in MR system technology. The SIGNA™ MR systems meets that challenge head-on with innovations in reconstruction to take full advantage of computing power and by leveraging both hardware and software technology.

SIGNA™ MR systems use enhance data reconstruction with AIR™ Recon DL\* and Sonic DL™\*. These applications use a smart reconstruction algorithm that reduces background noise and artifacts enhancing image quality without the need for longer scan times.

- Operating System: SUSE® Linux Enterprise Server (SLES)
- Reconstruction Engine: 2 x Intel Xeon Silver 4410Y processor (12 core)
- Total cores: 24
- Network: 1 GbE
- Memory: 192 GB
- Hard Disk Storage: 1.6TB SSD
- 2D FFT/second (256 x 256 Full FOV): 128,000 2D FFT/second
- GPU: 2 x NVIDIA RTX 4000 Ada

SIGNA™ MR systems generate MR Image, Secondary Capture, Structured Report, and Gray Scale Softcopy Presentation State DICOM objects. The DICOM networking supports both send and query retrieve as well as send with storage commit to integrate with PACS archive. Refer to the DICOM Compliance Statement for details.

Note: AIR™ Recon DL and Sonic DL™ features are optional and need to be purchased separately.

Line	Qty	Catalog	
<b>8.</b>	<b>1.00</b>	<b>M7004FW</b>	<b>Standard Cabinet Siting Kit</b>

Standard Cabinet Siting kit provides the cabinets and hardware components to install the system cabinets along the RF Screen Room wall shared between the magnet and equipment rooms.

Line	Qty	Catalog	
<b>9.</b>	<b>1.00</b>	<b>S7528VP</b>	<b>Voyager Preinstallation Collector - AIR Edition Standard Siting</b>

The Voyager Preinstallation Collector delivers to the site in advance of the magnet and main electronic components. This facilitates the later delivery and installation of supporting electronics. This collector contains the integrated cooling cabinet and the patient comfort and cryo hoses.

Line	Qty	Catalog	
<b>10.</b>	<b>1.00</b>	<b>M6001AA</b>	<b>Vent Adapter, Standard 8" Straight Up</b>

Vent Adapter, Standard 8" Straight Up

Line	Qty	Catalog	
<b>11.</b>	<b>1.00</b>	<b>M3335CE</b>	<b>1.5T Calibration Phantoms</b>

1.5T Calibration Phantoms

Line	Qty	Catalog	
<b>12.</b>	<b>1.00</b>	<b>M70012TR</b>	<b>Voyager Scan Room Collector - Short</b>

The Short Scan Room Collector contains a collection of cables such as gradient cables and other materials necessary for system interconnections. The short configuration is designed for room configurations that require a short length based on distance

between system components.

Line	Qty	Catalog	
<b>13.</b>	<b>1.00</b>	<b>M70033VL</b>	<b>SIGNA Voyager LONG Scan and Equipment Room Kit</b>

SIGNA Voyager LONG Scan and Equipment Room Kit

Line	Qty	Catalog	
<b>14.</b>	<b>1.00</b>	<b>M70022MC</b>	<b>Main Disconnect Panel - 380V/400V/415V/480V 50/60Hz</b>

The Main Disconnect Panel safeguards the MR system's critical electrical components, by providing complete power distribution and emergency-off control.

Line	Qty	Catalog	
<b>15.</b>	<b>1.00</b>	<b>M1000MW</b>	<b>Operator Console Table</b>

The Operator Console Table is designed specifically for the color LCD monitor and keyboard.

Line	Qty	Catalog	
<b>16.</b>	<b>1.00</b>	<b>M7012SW</b>	<b>Standard Site Fixed Table Cables</b>

Standard Site Fixed Table Cables

Line	Qty	Catalog	
<b>17.</b>	<b>1.00</b>	<b>M70012RP</b>	<b>English Language Kit</b>

English Language Kit

Line	Qty	Catalog	
<b>18.</b>	<b>1.00</b>	<b>R33012AC</b>	<b>Standard Service License</b>

The Standard Service 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.

Line	Qty	Catalog	
<b>19.</b>	<b>1.00</b>	<b>M7006NA</b>	<b>1.5T 16-channel AIR Anterior Array</b>

The 16-channel AIR Anterior Array (AA) is the next generation anterior array coil that allows flexibility in any direction to conform to the patient's anatomy. Based on the innovative AIR™ Coil technologies, the 1.5T 16ch AIR AA provides excellent image quality and acceleration performance, while improving the overall patient and user experience. The coil has been designed to adapt to various patient shapes and sizes, expanding positioning versatility.

Line	Qty	Catalog	
<b>20.</b>	<b>1.00</b>	<b>S7529QP</b>	<b>1.5T AIR™ MP Arrays and 16CH Shoulder</b>

This promotional coil package comprises:

- Large and Medium Multi-Purpose AIR™ Coils with coil positioner kit
- 16ch Shoulder Array

The 21-channel 1.5T AIR™ MP Large and the 20-channel 1.5T AIR™ MP Medium Arrays utilize innovative AIR™ Coil technologies to expand positioning versatility, enhance patient and user experience, and deliver high performance acceleration and image quality.

These next generation multipurpose coils are designed to conform to various patient shapes and sizes and allow positioning in any direction. AIR™ MP Coil Large Array is recommended for use for Shoulder, Knee, Foot, Ankle, Hip, and Prostate imaging, and the AIR™ MP Coil Medium is recommended for Wrist, Elbow, and Cardiac Imaging.

The AIR™ MP Coil Positioner Kit provides a knee positioner, a foot-ankle positioner, a wedge pad, a U-shaped pad, and a strap kit. The Positioner Kit is compatible with both AIR™ MP Large and Medium Coils for positioning.

The 16-channel 1.5T shoulder coil is a phased array design optimized for high resolution shoulder imaging with parallel imaging acceleration in 3 directions to address acquisition time. The coil combines a flexible, light anterior array with a hard-shell posterior array to enhance the ability to accommodate patient anatomy with lateral coverage to ensure large field of view imaging.

Line	Qty	Catalog	
<b>21.</b>	<b>1.00</b>	<b>M7013SA</b>	<b>AIR™ Recon DL EPI Diffusion</b>

The AIR™ Recon EPI Diffusion option enables users to use AIR™ Recon DL for Echo Planar Imaging sequences, including DTI and other diffusion sequences like FOCUS, PROGRES & MUSE.

Line	Qty	Catalog	
<b>22.</b>	<b>1.00</b>	<b>S7530UP</b>	<b>2D AIR™ Recon DL PROPELLER and DW-EPI</b>

AIR™ Recon DL is a pioneering, deep-learning based reconstruction algorithm applied to the raw scan data to improve SNR and image sharpness. This propriety technique improves image quality at the foundational level by removing image noise and ringing artifacts while enabling shorter scan times. With AIR™ Recon DL, customers will be able to:

- Remove noise in the images through trained deep learning algorithms
- Increase productivity by enabling shorter scan times
- Eliminate Gibbs and truncation artifacts with intelligent ringing suppression
- Experience sharper, clearer and accurate MR images
- Apply a tailored level of AIR™ Recon DL based on preference
- Visualize AIR™ Recon DL images directly at the MR console without reconstruction delays

2D AIR™ Recon DL PROPELLER is compatible with 2D radial motion-insensitive PROPELLER sequence which includes PROPELLER DWI.

Line	Qty	Catalog	
<b>23.</b>	<b>1.00</b>	<b>M7030AA</b>	<b>Auto Rotate Breast Image Option</b>

The Auto Rotate Breast Image Option enables a software feature that allows users to establish a default image display orientation for Axial Breast Images. This image allows axial breast images to be displayed in either Up or Down orientation by default.

Line	Qty	Catalog	
<b>24.</b>	<b>1.00</b>	<b>M7001SE</b>	<b>FOCUS</b>

FOCUS delivers a highly efficient method for increasing the resolution in Single Shot DW EPI sequences. The outcome delivers robust high resolution results while removing artifacts typically induced from motion, image backfolding or unsuppressed tissue. In addition, with the higher efficiency of the application, the reduced field of view imaging leads to a reduction in blurring that translates into an overall improvement to the image quality result. The sequence utilizes 2D selective excitation pulses in DW-EPI acquisitions to limit the prescribed phase encoded field of view at both 1.5T and 3.0T field strengths.

Line	Qty	Catalog	
<b>25.</b>	<b>1.00</b>	<b>M7006AE</b>	<b>MAGiC DWI</b>

MAGiC Diffusion (DWI) provides the ability to acquire lower b-value diffusion data and extrapolate to higher b-value results leading to inherent high signal to noise gains in addition to scan time reduction through the computed b-value principle.

Line	Qty	Catalog	
<b>26.</b>	<b>1.00</b>	<b>M7005BE</b>	<b>Flex Array Positioner</b>

The Flex Array Positioner is a multipurpose support for a broad range of exams including foot, ankle, forefoot, knee, and head. A dedicated forefoot attachment allows the flex array elements to be wrapped tightly around the foot, yielding improved image quality. A repositionable support pad in the foot and ankle attachment allows for selection of a 90 degree position, or a relaxed position of the ankle. The pads and straps included with the stabilizer facilitate rapid setup and allow for flexibility in how the anatomy is secured.

Line	Qty	Catalog	
<b>27.</b>	<b>1.00</b>	<b>M70072CC</b>	<b>1.5T Split Top Head Coil (Transmit/Receive)</b>

- Quadrature Birdcage design
- Internal diameter 28 cm, compatible with third-party stereotaxy frames and localizers
- Integrated mirror minimizes claustrophobia

Specifications:

- Elements: 1
- Maximum number of channels in max FOV: 1
- Dimensions (W x H x L) 42 x 36.6 x 42.5 cm
- Weight 5.5 kg
- S/I Coverage 38.2 cm
- R/L Coverage 28.1 cm

Line	Qty	Catalog	
<b>28.</b>	<b>1.00</b>	<b>S7529QT</b>	<b>1.5T AIR™ MP Arrays and 16CH T/R Knee</b>

This promotional coil package comprises:

- Large and Medium Multi-Purpose AIR™ Coils with coil positioner kit
- 16ch T/R Knee Array

The 21-channel 1.5T AIR™ MP Large and the 20-channel 1.5T AIR™ MP Medium Arrays utilize innovative AIR™ Coil technologies to expand positioning versatility, enhance patient and user experience, and deliver high performance acceleration and image quality.

These next generation multipurpose coils are designed to conform to various patient shapes and sizes and allow positioning in any direction. AIR™ MP Coil Large Array is recommended for use for Shoulder, Knee, Foot, Ankle, Hip, and Prostate imaging, and the AIR™ MP Coil Medium is recommended for Wrist, Elbow, and Cardiac Imaging.

The AIR™ MP Coil Positioner Kit provides a knee positioner, a foot-ankle positioner, a wedge pad, a U-shaped pad, and a strap kit. The Positioner Kit is compatible with both AIR™ MP Large and Medium Coils for positioning.

The 16-channel 1.5T Knee coil is a transmit/receive phased array design optimized for high resolution imaging of the knee with parallel imaging acceleration in 3 directions to address acquisition time. The coil is sized to accommodate a broad range of patient sizes and features a two-part design to address workflow. Offset imaging is fully supported with adjustable left-right coil positioning.

Line	Qty	Catalog	
<b>29.</b>	<b>1.00</b>	<b>E8822JB</b>	<b>Sanitary Covers for Headset - 1000/Box</b>

Sanitary covers for audio headsets. Packaged 1000 units per box.

Line	Qty	Catalog	
<b>30.</b>	<b>1.00</b>	<b>E8823NA</b>	<b>MRIaudio 1505 Complete system</b>

MRIaudio 1505 Complete music system for MRI systems is designed for comfort and allows the patient to listen to music while being scanned in an MRI. The technologist is in full control of the system headphones, microphone, sound source and volume controls. Standard 3.5 mm plug for music source allows any compatible music player, tablet or phone. In-ear headphones work with any head coil.

Package includes:

- Digital amplifier
- iPad
- Adjustable iPad stand
- 3G transducer
- In-ear headphones, 29dB noise reduction
- Over-ear headphones, 29dB noise reduction
- Slimline over-ear headphones (audio only, must be worn with earplugs)
- Disposable ear tips (300 pairs)

- Technologist's speakers
- 8 ft RCA 3.5 mm cable
- Auto-voice/MIC adapter

Compatible Systems

SIGNA Champion, SIGNA Victor, SIGNA Prime, SIGNA Hero, SIGNA Premier, SIGNA Architect, SIGNA Artist, SIGNA, Voyager, SIGNA Pioneer v26.1 and higher, SIGNA PET/MR, SIGNA HDxt, Discovery MR750/750w, Optima MR450/450w, SIGNA Creator v25.3 and higher, SIGNA Explorer v25.3 and higher

Line	Qty	Catalog	
<b>31.</b>	<b>1.00</b>	<b>E8823NC</b>	<b>MRI Audio 29dB Ear plugs - 250 pairs per bag</b>

Replacement ear plugs compatible with MRI Audio in-ear headphone (E8823NB). Comprised of a flexible inner tube and surrounded by soft, comfortable foam. These ear plugs are rated at 29dB NRR when used in conjunction with in-ear headphone. 250 pairs per bag, 500 total pieces.

Line	Qty	Catalog	
<b>32.</b>	<b>1.00</b>	<b>E8914DJ</b>	<b>Dimplex MR Heat Exchanger 36kW - Standard Ambient Temp, with 1 year warranty and 2 PMs</b>

GE Healthcare has partnered with the Glen Dimplex Group to offer chillers designed to meet the needs of your MR System.

This chiller is highly reliable and is verified to perform with GE Healthcare MR systems. As part of your integrated GE Healthcare solution, you'll work with a single contact throughout the whole installation. A Project Manager of Installation will help with building layout, room designs, delivery and installation - every step until your system is ready to scan. Our team will work seamlessly with architects, contractors and your internal team to help ensure timely, cost-effective completion.

Once your cooling system is running, you'll get fast, highly-skilled service support managed through GE Healthcare with the same quality and response time you expect from your MR system.

FEATURES AND BENEFITS

- Designed to provide stable fully dedicated cooling for your MR system's needs
- Water/glycol outdoor-air-cooled chiller to support your highest exam volumes and your full range of diagnostic procedures
- Installation support from the vendor includes: 1 start up, 2 preventative maintenance visits (during warranty), and 12 months of parts and labor warranty
- Installation support includes: support through GE's Project Manager of Install, GE's Design Center, remote technical support from the Glen Dimplex company
- Comprehensive and quality service rapidly delivered through our CARES service solution
- 70 gallons of water-glycol pre-mixture (50/50%)
- Remote display panel provides the ability to monitor the system's operation from the control room. When plugged into a LAN connection, system can be remotely monitored and diagnosed for proactive maintenance.
- Highly recommended that Vibration Isolation Spring Kit (E8914DP) be added for systems that will be rooftop mounted
- Environmental friendly and non-ozone harming refrigerant R407C

SPECIFICATIONS

- Net Cooling Capacity: 36 kW at 60Hz
- Coolant Outlet Temperature: 50 F (10 C)
- Max Coolant Pressure : 2.75 Bar
- Refrigerant: R407C
- Coolant: 50% water and 50% glycol with inhibitors
- Ambient Temp Range: -20 to 122 F (-28.89 to 50 C)
- Tank Capacity: 70 gallons (265 L)
- Supply Voltage: 460v/3 phase /60 Hz
- Overall Size (L x W x H) 111 in x 31.5 in x 76.25 in
- Operational weight 2550 lb (1157 kg)

COMPATIBILITY:

- GE Signa Pioneer 3.0T MR system and GE Signa Voyager 1.5T MR system

NOTES:

- Chiller is non-returnable and non-refundable.

Line	Qty	Catalog	
<b>33.</b>	<b>1.00</b>	<b>E8914DP</b>	<b>Dimplex Chiller Vibration Isolation Spring Kit- for 36kW chillers only</b>

The Vibration Isolation Spring kit is used to mount a Dimplex chiller on a rooftop. This will reduce noise and lessen vibration above or near patient care areas or offices. Comes in a set of 8 spring feet as specified for a Dimplex chiller.

COMPATIBILITY

For use with the following Dimplex Chillers only: E8914DJ, E8914DK, E8914DL, E8914SF, E8914SG, E8914SH

Line	Qty	Catalog	
<b>34.</b>	<b>1.00</b>	<b>E8011M</b>	<b>MR Coil Cart</b>

FEATURES/BENEFITS

- Holds CTL, NV, brain, extremity, body and shoulder coils
- Designed to match the scanner, holds 6 coils
- Four swiveling, locking casters for easy movement

SPECIFICATIONS

- Measures 44" L x 32" W x 48.75" H
- Weighs 130 lbs.

Line	Qty	Catalog	
<b>35.</b>	<b>1.00</b>	<b>E4504FP</b>	<b>Eaton Single Phase 700 VA Partial UPS (MR package)</b>

Using an uninterruptible power supply (UPS) can help improve user productivity and system reliability, as well as reduce service costs and increase system uptime.

Combining reliable double-conversion topology, internal static bypass and an easy-to-ready LCD menu display, the Eaton 9SX UPS provides the highly efficient and reliable power you expect from a 9-series UPS in a convenient tower form factor.

Applications

The Eaton® Single Phase 9SX 700 VA Partial UPS package is designed to support a variety of GE MR imaging systems. When Catalog# E4504FP is used with MR SIGNA™ Voyager, SIGNA™ Pioneer, SIGNA™ Premier, SIGNA™ Architect or SIGNA™ Hero systems, the configuration requires ordering a specific power cable (catalog# E4504FN).

Maintain productivity, improve reliability

Reliable power for critical systems

The 9SX offers the robust double-conversion, online power protection needed for medical, light industrial, automation and mission critical IT applications. With zero transfer time to battery, continuous filtering of power, and an internal, automatic static bypass, the 9SX ensures performance and compatibility.

- \* Maintains system's host computer and operator's workstation power for ~8 minutes after loss of power
- \* Minimizes loss of data
- \* Provides clean constant voltage power
- \* Host computer and operator's workstation electronics unaffected by under voltage, brownouts, line sags, over voltage, transients, periodic emergency generator testing or automatic transfer switch operation
- \* Host computer and operator's workstation electronics protected from utility power factor capacitor switching spikes and ring waves
- \* Host computer and operator's workstation electronics protected from utility re-closer operations common during thunderstorms
- \* Regulates output voltage to meet and exceed system electronics requirements

- \* Allows time for an orderly system shutdown in the event of an extended power outage
- \* Reduces maintenance costs
- \* Helps increase system uptime
- \* Suitable for engine generator applications
- \* Suitable for mobile applications (other optional equipment may be needed)
- \* Installation of the UPS by GE
- \* 1-year warranty on parts and labor

#### Increased battery life

- \* Advanced battery management to extend battery life and provide advanced notice before batteries fail
- \* Batteries are hot-swappable

#### More control

- \* Automate power delivery by utilizing switchable, programmable outlets
- \* Programmable signal input through the RPO port also enables the UPS to change operating modes in reaction to external events

#### Advanced LCD interface

- \* Simplify UPS monitoring with Eaton's advanced LCD display
- \* Easy access to UPS alarm history, energy logs, unit serial numbers and firmware versions enable first time issue resolution right at the source
- \* Eight user-selectable languages ensure success for global deployments

#### Specifications

- \* Power: 700 VA / 630 W
- \* Input connection: 5-15P, eight feet long
- \* Output receptacles: (5) 5-15R
- \* Dimensions (H x W x D, in. / mm): 9.9 x 6.3 x 13.9 / 252 x 160 x 357
- \* Weight (lb. / kg): 26.5 / 11.5

#### General

- \* Topology: Double-conversion, online
- \* Configuration: Tower
- \* Color: Black and silver
- \* Diagnostics: Full system self-test at power up, ABM battery test every 30 days
- \* Warranty: 1 year on electronics and battery
- \* Remote power off: Remote On/Off (ROO) and Remote Power Off (RPO) rear terminal blocks
- \* Contents: UPS, Safety guide, Quick Start Guide, Reference Guide, RS-232 serial cable, USB cable

#### Electrical input

- \* Nominal voltage: 120V default (100/110/120/125V)
- \* Input voltage range: Full load: 100-138V, 75% load: 60-144V
- \* Frequency: 50/60 Hz
- \* Frequency range: 60 Hz: 50-70 Hz, 50 Hz: 40-60 Hz
- \* Input power factor 7.99
- \* Input current distortion 7.8%

#### Electrical output

- \* Power rating: 700VA / 630W
- \* Circuit breaker: None
- \* Nominal voltage: 120V default (100/110/120/125V)
- \* Output voltage regulation, steady state:  $\pm 2\%$  nominal mode
- \* Output voltage THD (online): Linear:  $< 3\%$
- \* Power factor: 0.9
- \* Efficiency (online mode with resistive load): 87%
- \* Transfer time: 0 ms

#### Communications

- \* User interface: Graphical display. UPS status in a single view.
- \* LEDs: 4 status-indicating LEDs
- \* Communication ports: RS-232 (RJ45) ports; USB port as standard (HID). 6-foot RS-232 and USB cables included

#### Environment & standards

- \* Operating temperature: 0 to 40 °C (32 to 104 °F) in Online mode, with linear derating for altitude
- \* Storage temperature: 0 to 35 °C (32 to 95 °F); without batteries: -25 to 55 °C (-13 to 131 °F)
- \* Relative humidity: 0 to 96% non-condensing

\* Altitude operating temperature range: UP to 3,000 meters (9,843 ft) above sea level, no derating for 35 °C (95 °F) room temperature

\* Audible noise: < 50 dBA at 1 meter typical

\* RoHS compliance: Yes

\* Safety conformance: UL 1778; IEC 62040-1

\* EMC: FCC Part 15 Class B; IEC 62040-2 C1 & C2

\* Markings: CE; cULus; NOM

\* Battery backup time: 5.8 min@ 630 W, 14 min@ 300W

Notes:

- Customer is responsible for rigging UPS unit
- Item is non-returnable and non-refundable
- Removal/disposal of the old unit is the customer's responsibility

Line	Qty	Catalog	
<b>36.</b>	<b>1.00</b>	<b>E4504FN</b>	<b>Power cable for E4504FP MR Partial UPS</b>

Application

E4504FN power cable is required when ordering E4504FP MR Partial UPS package.

NOTES:

- Customer is responsible for rigging and arranging for installation with a qualified party
- ITEM IS NON-RETURNABLE AND NON-REFUNDABLE
- Removal/disposal of the old unit is the customer's responsibility.

Line	Qty	Catalog	
<b>37.</b>	<b>1.00</b>	<b>W2401MR</b>	<b>1.5T Launch Classic Training Program</b>

This training program is designed for customers purchasing a GE HealthCare 1.5T MR system (including but not limited to SIGNA™ Artist, Voyager, Creator, Explorer, Prime, Champion, and Victor).

GE HealthCare 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. The training will include Virtual Tools and remote connectivity. This blended curriculum with multiple delivery platforms promotes learner retention and allows for an efficient and effective skill development.

This program contains 96 Credits. A customized training program blending onsite and virtual training will be developed in partnership with your Applications Specialist.

- Onsite training – each onsite day of training utilizes 8 credits per instructor (8-hour day)
- Virtual training – each hour of virtual training utilizes 1 credit per instructor
- Virtual instructor-led training: Instructor leads a virtual training session one-on-one or in a group, typically in 2-4 hour scheduled blocks
- Answerline Support-Access to GE HealthCare experts for clinical, non-emergency applications assistance via phone or by using the iLinq button on the imaging console
- In addition to the credits available with this offering, the customer has access to the complimentary, no-cost online educational content available for all customers, both CE and non-CE.

Classroom-Based training (if applicable) – each seat in a classroom-based training (in person or virtual) utilizes 16 credits per student (ala carte offerings are available).

Training will be delivered at a mutually agreed upon time between the customer and GE Healthcare (excluding GE Healthcare holidays and weekends) and is subject to availability during normal business hours (8am-5pm). This training program has a term of twelve (12) months commencing on Acceptance, where all training (onsite and/or virtual) must be scheduled and completed within twelve (12) months of Acceptance. Additional credits may be available for purchase separately.

All GE HealthCare “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.

Line	Qty	Catalog	
38.	1.00	M3335CA	<b>Calibration Kit Phantom Holder Cart</b>
Calibration Kit Phantom Holder Cart			

Line	Qty	Catalog	
39.	1.00	NI_MR_INSTALLATION	\$18,000 is applied to 3rd-Party Rigging Services, as directed by Customer. Rigging (including excess/additional rigging costs) remains the Customer's responsibility. Unapplied rigging funds will be forfeited without refund or credit.

**Total Equipment Price** **\$1,670,220.04**

**Total Quote Net Selling Price** **\$1,670,220.04**

**ENSURE REQUISITION/PURCHASE ORDER IS ISSUED TO:  
 GE PRECISION HEALTHCARE  
 TAX ID (83-0849145)**

## Governing Agreement Reference Information

Customer:	Covenant Diagnostic Center South
Contract Number:	Vizient Supply LLC
Billing Terms:	80% on Delivery / 20% on Acceptance
Payment Terms:	45 Net
Shipping Terms:	FOB Destination

Offer subject to the Terms and Conditions of the applicable Governing Agreement currently in effect between GE HealthCare and Vizient Supply LLC

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

This product offering is made per the terms and conditions of Vizient /GE Healthcare GPO Agreements as follows:

**Imaging:**

XR0882-MR, XR0702-Card./Vasc., XR0673-CT, XR0652-Mammo, XR0895 PET-CT & Nuc Med, XR0715-R&F/RAD & XR0592-ICAR-EP/HEMO, XR0692-BMD

**Ultrasound:**

XR0918-Ultrasound

**LCS:**

CE7152 (Anesthesia), CE7633 (Monitoring), CE9233 (Infant Care), CE7621 (DCAR) and CE7293 (Ventilators).

To access the Vizient Terms & Conditions: Please login to the Vizient Catalog website: <https://www.vizientinc.com/member-login>

If you require assistance or are experiencing issues, please contact Vizient for support:

- Email: [Vizientsupport@Vizientinc.com](mailto:Vizientsupport@Vizientinc.com)
- For Vizient customers, please contact Phone (800) 842-5146
- For Provista Customers, please contact 888-538-4662.

**ODC Facility Lease - Sum of Lease Payments for Initial Lease Term**

	Year 1-10	
Facility Lease Rate	\$	46.00
Square Feet		10,000
	\$	460,000

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Initial term 10 years

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Sum of lease payments \$ 4,600,000

**ODC Facility - Value (FMV) based on Estimated Project Costs**

Architectural & Engineering Fees	\$	322,400
Legal, Admin., Consulting	\$	8,000
Acquisition of Site	\$	564,057
Preparation of Site	\$	60,345
Total Construction	\$	6,448,000
Contingency	\$	644,800
Fixed Equipment	\$	-
Other	\$	-
		<u>\$8,047,602*</u>

\*Allocation of total project development and construction costs to the percentage of the total MOB occupied by the ODC project.

Note: the "sum of the anticipated ODC facility lease payments for the initial 10 year lease term" is less than the comparison calculation for the "total estimated facility value for the ODC project" (FMV) which includes all appropriate site development and construction related factors for the ODC project. Therefore, the greater of the two calculations has been used in the Project Cost Chart of the ODC CON Application as required.

## **Attachment: Medical Equipment Summary**

As required by the Project Cost Chart, below is a list of moveable medical equipment over \$50,000.

- MR30 1.5T magnetic resonance system – \$1,670,220
- CT (64-ch 128 slice) – \$600,000
- Mammography – \$350,000
- X-ray 2 Detector OTS – \$250,000
- Ultrasound – \$150,000
- Bone Density – \$65,000

**Project Name :** Covenant Health Diagnostics Blount County ODC

**Supplemental Round Name :** 1

**Due Date :** 2/10/2026

**Certificate No. :** CN2601-001

**Submitted Date :** 2/3/2026

### 1. 6A. Name of Owner of the Facility, Agency, or Institution

There appears to be a typo in the name of the owner - Covenant Health Diagnostics Centers, LLC.

**Response :** Correct. The owner is Covenant Health Diagnostic Centers, LLC. The typo has been fixed.

### 2. 1E. Overview

What presence does Covenant Health have in Blount County? How will this presence support referrals to the proposed ODC?

Will the ODC provide any unique imaging modalities not available at the hospital?

How many patients are currently being sent out of Blount County for imaging in an ODC setting affiliated with the applicant?

What is the distance from the proposed ODC to Blount Memorial Hospital?

How far are the other ODCs operated by Covenant Health from Blount Memorial Hospital?

#### **Response :**

- Covenant Health currently operates two urgent care locations – one located at 117 Gill St., Alcoa, TN 37701 and one located at 108 Keller Ln, Maryville, TN 37801. Covenant Health also operates a primary care office located at 1921 Topside Road, Louisville, TN 37777 in northern Blount County and an existing MOB located at 205 Corporate Place, Alcoa, TN 37701 which houses a urology clinic and outpatient psychiatric services. Covenant Health expects that imaging orders for the proposed ODC will originate from these existing affiliated providers in the community. In addition, the proposed ODC will be co-located as part of Covenant Health's new Springbrook medical campus, which will include a new 60,000 sq. ft. MOB offering urgent care, primary care, specialty clinics, rehabilitation and oncology services. Co-locating this ODC within the new Covenant Health

Springbrook MOB will provide a convenient option for patients from the other clinics on the Springbrook campus to receive imaging should their physicians order it.

- The imaging services provided at the Springbrook ODC will be similar to those normally offered in a hospital setting. The differentiators for the ODC are cost, patient convenience, and an outpatient imaging option in Blount County that does not currently exist today.
- Patients are not typically referred to a specific imaging location; instead, medical providers write an imaging order, and patients are free to choose the imaging provider that best fits their needs, location and schedule, and that aligns with their insurance's requirements. In 2024, 849 Blount County residents received imaging services at Covenant Health's West ODC and 229 Blount County residents were treated at Covenant Health's South ODC. In total, Knox County-based ODCs provided imaging services to 6,051 Blount County residents in 2024.
- The Covenant Health Blount County ODC will be located 4.4 miles and approximately 11 minutes from Blount Memorial Hospital.
- Covenant Health Diagnostics West is 17.8 miles and approximately 25 minutes from Blount Memorial. Covenant Health Diagnostics South is 18.6 miles and approximately 30 minutes from Blount Memorial.

### 3. 2E. Rationale for Approval

What are the approximate wait times now for non-emergency outpatient imaging?

What percentage of imaging being performed at the hospital would be appropriate for the ODC setting?

#### Response :

- Wait times at existing imaging providers in Blount County are not publicly available. Based on available equipment registry data, the existing MRIs and CT scanners in Blount County are very highly utilized, suggesting a need for additional imaging resources in the community.

- Most outpatient imaging performed in a hospital setting could be safely and appropriately accomplished in an ODC setting. Imaging for hospital inpatients with high-risk clinical conditions, ED imaging, and trauma imaging would still be most suitable for a hospital setting.

#### 4. 1N. Criteria and Standards

Please remove the attachment for 1N - MRI Criteria and Standards as they do not apply.

**Response :** Attachment 1N.B. - Standards and Criteria for Initiation of MRI Services has been removed from the Application.

#### 5. 3N. Demographics

Please provide population projections based on 2026-2030 through the Boyd Center in response to Item 3NB.

[Boyd Center Population Projections | Tennessee State Data Center](#)

Please update the Median Household Income and Percentage of Persons in Poverty based on the Census Quick Facts website. [U.S. Census Bureau QuickFacts: United States](#)

Please update the TennCare % based on the revised population projections.

**Response :** An revised service area demographic chart with the requested information has been reattached to the application as Attachment 3N.B.R.

#### 6. 6N. Utilization and/or Occupancy Statistics

Does the historical utilization of the applicant's affiliate ODC facilities primarily reflect local (single county) utilization?

Please describe the network of providers in the area that are expected to represent the referral base for this ODC.

What sources are patients projected to be referred from?

What percentage of patients are projected to shift from the hospital to being served in the proposed ODC?

**Response :**

- Covenant Health operates two existing ODCs in Knoxville. Covenant Health Diagnostics South is approximately 2.5 miles from Sevier County, where no existing ODC exists. Approximately 84% of CHD South's utilization in 2024 originated from either Knox or Sevier Counties. Covenant Health Diagnostics West is in central Knox County and in 2024, 63% of its patients originated from Knox County. This is unsurprising given Knoxville's role as a regional medical hub and the limited number of providers in the surrounding local communities. By comparison, according to its most recent JAR, 81% of Blount Memorial's inpatients were Blount County residents. Similarly, Covenant Health projects that most residents who will utilize the proposed ODC will be from Blount County. It is unlikely that Knox County residents will travel away from Knoxville for imaging services. Most residents in Sevier County to the east will be closer to CHD South. And the counties to the south and west of Blount County lack enough population to significantly drive additional utilization volumes.
- For questions 2 and 3, as discussed above, patients are not typically referred to a specific imaging location. Outpatient imaging centers will receive orders from a wide range of healthcare providers, including primary care physicians, specialists, urgent care centers, and hospital-based clinics. Here, there are over 15 primary care practices and urgent care centers in Blount County that could recommend imaging to a patient which the ODC could provide. Similarly, Tennessee Orthopaedic Alliance recently opened a clinic in close proximity to the Springbrook MOB that could be source of patient imaging. As described elsewhere in the application, co-locating this ODC within the new Covenant Health Springbrook MOB will also provide a natural opportunity for patients from the other clinics on the Springbrook campus to receive imaging should their physicians order it. The Blount County ODC will be open to all of these patients, regardless of referral source.
- Covenant Health has not generated utilization projections that specifically forecast a shift from hospital-based imaging to the ODC. Most outpatient imaging performed in a hospital could be safely and appropriately accomplished in an ODC setting. It will be up to the individual patient to determine whether he or she would prefer to receive imaging in the hospital or opt for the more convenient and cost-effective option offered by the ODC. It is common for commercial insurers to steer patients to freestanding imaging services over hospital-based providers because of lower costs, which will likely require, in some instances, for patients to choose the ODC option.

**7. 3C. Effects of Competition and/or Duplication**

Does the applicant have any affiliation with Allergy Asthma and Sinus Center, PC which operates a CT unit in Blount County. Are there any known limitations in accessing that CT unit?

Does the applicant have any affiliation with East Tennessee Medical Group?

Please discuss the benefits to self-pay patients in terms of projected pricing difference between the ODC and the hospital.

**Response :**

- Covenant Health has no affiliation with Allergy Asthma and Sinus Center, PC. Because it is not licensed as an ODC, Covenant Health would expect access to the Allergy Asthma and Sinus Center CT to be restricted to patients of the practice and that the CT scans would be offered for limited ENT-related purposes. The low reported volume for the Allergy Asthma and Sinus Center CT would seemingly support these assumptions.
- Covenant Health has no affiliation with East Tennessee Medical Group. East Tennessee Medical Group was acquired by Blount Memorial Hospital in 2012 and became part of the Prisma Health System in 2024 when Prisma purchased Blount Memorial.
- Covenant Health offers affordable discounted medical imaging services for patients paying out of pocket. Covenant's current self-pay cost schedule is available online at <https://www.covenanthealth.com/patients-visitors/discounted-imaging/>.

**8. 4C. Accessibility to Human Resources**

Are the necessary staff referenced in this response working in Blount County outpatient medical imaging sites or are they expected to come in from Knox County?

Are the applicant's affiliated ODCs fully staffed currently?

- Response :**
- Covenant Health has not identified specific imaging technologists to staff the proposed ODC. Covenant Health employs hundreds of such technologists across its system and, to the extent any current employees live in Blount County or would otherwise find the ODC a more convenient employment location, Covenant Health will offer them the option of relocating.
  - Yes, Covenant Health's two existing ODCs are fully staffed.

**9. 5C. License/Certification**

Have the individuals or groups responsible for providing physician supervision been determined at this time?

Have quality assurance policies and programs been developed at this time? Are these policies expected to mirror the existing affiliate ODCs?

**Response :**

- Vista Radiology will provide physician supervision for the ODC. Vista is an independent radiology practice of board-certified radiologists based in East Tennessee that currently provides radiology interpretation and supervisory services at multiple Covenant Health facilities.
  
- The quality assurance policies and programs for the Blount County ODC will mirror those at Covenant Health’s other two existing ODCs.

**10. 9C. Other Facilities Charges**

Please provide a comparison of procedure costs for CT services in addition to MRI services based on the Medical Equipment Registry.

**Response :**

The gross charge per CT scan in 2024 for existing CT providers in Blount County is sourced below from the Commission's equipment registry and compared to the projected gross charge per CT scan for the proposed ODC in Year 1.

<b><u>2024 Gross Charge Per CT Scan</u></b>	
Covenant Blount County ODC	\$385.78
Blount Memorial Hospital	\$6,737.27
East Tennessee Medical Group	\$11,226.80
Allergy, Asthma and Sinus Center	\$580.60

**11. 10C. Project Only Payor Mix**

Is the projected percentage of commercial payors consistent with other ODCs affiliated by the applicant? Please discuss the factors - patient age, payor policies requiring referral to outpatient imaging, that result in the high percentage of commercial payor revenue.

**Response :**

- Yes, the projected percentage of commercial payors is generally consistent with other ODCs affiliated with the applicant.
- Blount County is an extension of the Knoxville MSA, with several large employers offering commercial insurance plans. Since freestanding imaging centers provide convenience, efficiency, and lower cost, ODCs typically align with the needs and preferences of commercially insured working patients under employer-sponsored plans. Moreover, commercial insurers will often steer patients to freestanding imaging services over hospital-based provider because of lower cost, which contributes to a higher commercial percentage in the ODC's projected payor mix.

**12. 7Q. Legal Judgements**

Please address the following:

[justice.gov/usao-edtn/pr/covenant-health-settles-americans-disability-act-claim-united-states](https://www.justice.gov/usao-edtn/pr/covenant-health-settles-americans-disability-act-claim-united-states)

**Response :**

- Covenant Health entered into a settlement agreement with the Department of Justice related to allegations that a Covenant Health facility violated the Americans with Disabilities Act by failing to provide an effective means of communication for a deaf patient. While Covenant Health denied any violation occurred, it voluntarily entered into the settlement agreement to demonstrate its commitment to complying with the ADA. Covenant Health successfully satisfied all terms of the settlement agreement with the Department of Justice and that agreement has subsequently expired. Covenant Health works diligently to ensure patients and their companions who are deaf or have difficulty hearing can communicate effectively with health care providers, including offering communication aids and assistance without charge.

**13. 1N. Criteria and Standards**

Please discuss the overall differences in between the imaging modalities that will be available at the proposed ODC, and all other operators (hospital, physician office, etc.) in Blount County.

**Response :**

- The proposed ODC will offer a comprehensive suite of advanced imaging modalities, including a 1.5T MRI unit, CT, X-ray, bone density, mammography,

and ultrasound. While Blount Memorial Medical Center provides many of the same capabilities, it does so at substantially higher cost while having to prioritize inpatient and emergency needs, which can lead to longer wait times. While the Commission's equipment registry lists the East Tennessee Medical Group MRI and CT as being licensed as part of the ETMG physician office, it is the applicant's understanding based on the Blount Memorial Joint Annual Report and information provided by Commission staff, that the ETMG imaging equipment is billed as a department of Blount Memorial, which explains the very high charges for services. As discussed above, the Allergy Asthma and Sinus Center CT in Blount County is limited to patients of the practice requiring CT scans for ENT-related diagnoses. Other physician offices in Blount County may offer a limited set of basic modalities like x-ray or ultrasound, but those too would be limited to the patients of the individual practice and designed to support in-office diagnosis rather than more comprehensive imaging. In summary, the proposed project will address an existing service gap in Blount County by providing the full spectrum of imaging technologies in an affordable and convenient outpatient setting.

**Project Name :** Covenant Health Diagnostics Blount County ODC

**Supplemental Round Name :** 2

**Due Date :** 2/12/2026

**Certificate No. :** CN2601-001

**Submitted Date :** 2/10/2026

**1. 9C. Other Facilities Charges**

Please provide a Gross Charge per MRI procedure for 2024 based on the Equipment Registry for Blount County MRI units.

**Response :** The gross charge per MRI procedure in 2024 for existing MRI providers in Blount County is sourced below from the Commission's equipment registry and compared to the projected gross charge per MRI procedure for the proposed ODC in Year 1. The applicant's previous response to question 9C contained a calculation error that has been corrected.

<b><u>2024 Gross Charge Per MRI Scan</u></b>	
Covenant Blount County ODC	\$345.05
Blount Memorial Hospital	\$6,601.90
East Tennessee Medical Group	\$3,763.22