



The Role of Office-Based Imaging in Patient Care

An Issue Background

Introduction

As medical imaging technology advances and becomes more cost efficient, physicians are increasingly taking advantage of these improvements by incorporating office-based imaging into their diagnostic and treatment regimens. As a result, specialists have recognized that providing in-office imaging offers:

- Immediate results and faster diagnoses
- Improved patient compliance
- Better health outcomes
- Reductions in invasive diagnostic techniques
- Fewer duplicative office visits

Through the 1992 “Stark Law,” Congress extended restrictions on physicians’ self-referral of radiology services to entities in which they have ownership interest. However, the law includes an “in-office ancillary services exception,” which allows office-based diagnostic testing for physicians who own their own equipment and house it in their offices.

Specialists have embraced the logical marriage between their specialized expertise and new diagnostic techniques to improve patient care. In many cases, imaging is replacing invasive diagnostic procedures that once required hospital stays or outpatient surgeries.

Current Situation

Medical imaging, whether conducted in a specialist’s office, a hospital or a radiology center, has proven to be a significant diagnostic tool, so much so that in 1999 the *New England Journal of Medicine* called medical imaging one of the “great medical developments of the past thousand years.” A number of forces – including changes in standards of care for many illnesses, expansions in coverage for new diagnostic imaging modalities, and shifts in the site of service from hospitals to other health care settings – have resulted in a noticeable growth in imaging services.

A March 2005 report released by the Medicare Payment Advisory Commission (MedPAC) has examined and reported higher growth rates for imaging services and tests than for other Medicare services. And while MedPAC’s growth rates are disputable, the American College of Radiology (ACR) and others in the radiology community are using the growth trends in medical imaging utilization to advance an agenda that would limit the ability of specialists to administer

and interpret office-based imaging services. To achieve its legislative goals, ACR has undertaken an aggressive public relations and lobbying campaign to question the value of office-based imaging. They have tried to claim that the scans being performed by specialists are “substandard,” “unnecessary,” and lead to inappropriate scans which waste public and private health care resources.

In an effort to educate policymakers about the benefits of office-based medical imaging, a growing number of specialty medical organizations have joined together to form the Coalition for Patient Centered Imaging. The Coalition is committed to improving patient care by maintaining a patient’s right to receive the most advanced, effective diagnosis and treatment by their specialist in the office setting.

The Facts

While opponents of office-based imaging suggest that physicians are conducting imaging to enhance revenue streams, a recent report by the The Lewin Group found that physicians with on-site imaging order more images regardless of financial incentives. This finding suggests that increased imaging among self-referring physicians is due to convenience, clinical considerations and a desire among physicians to have as much information as possible about a patient and condition in order to develop accurate diagnoses and care regimens. The facts about the benefits of office-based imaging are:

Fewer diagnostic procedures: To the benefit of patients and health care payers, the Lewin study found that the increase in office-based imaging is a factor in the reduction of the number of more costly and riskier diagnostic procedures.

Less time: The rapid interpretation and communication of test results allows for early detection and treatment. Health outcomes are increased, patient anxiety is minimized, and the number of office visits is reduced. The Lewin study found that these factors reduce overall health care expenditures and increase patient well-being.

Patient Familiarity: The specialty physician is familiar with the patient’s clinical condition, medical history and previous test results. They have the expertise, educational background and experience to perform and interpret images that could impact clinical decision making.

Comprehensive approach: Significant benefits are realized for patients when a qualified specialty physician determines which optimal study to perform, interprets the image, and then integrates the results with full knowledge of the patient’s clinical condition.

The Coalition for Patient-Centered Imaging (CPCI) is a coalition of specialty and physician groups dedicated to ensuring that patients continue to have access to diagnostic imaging services in their physicians’ offices.

Office-Based Imaging: Good Medicine. Better for Patients.