Imaging Grows Slower Than Other Medical Services

The Medicare Payment Advisory Commission (MedPAC) may have published its latest report to the U.S. Congress in March, but its findings and recommendations aren’t new: the commission continues to focus growth in imaging utilization that occurred more than a decade ago, despite a relatively small volume increase between 2016 and 2017. “While volume growth for imaging in 2017 was slightly lower than the average increase for all services and follows a slight decrease from 2012 to 2016, use of imaging services remains much higher than it was in 2000,” MedPAC said. “Cumulative growth in the volume of imaging per beneficiary from 2000 to 2017 totaled 75%, which was much higher than cumulative growth during the same period for major procedures and [evaluation and management] services (47% and 45%, respectively).”

Still, the commission acknowledged that the 1.3% increase in imaging in 2017 was lower than the average increase for all healthcare services, and it follows decreases from 2012 to 2016. In fact, the average annual change in imaging volume per beneficiary had a negative percent increase.

To address concerns about imaging overuse, organizations such as the American Board of Internal Medicine (ABIM) have developed campaigns to identify overused procedures, MedPAC said. The U.S. Centers for Medicare and Medicaid Services (CMS) is also developing a program that will require clinicians to use clinical decision-support software when they order advanced imaging services for beneficiaries.

“Overall, access to clinician services to Medicare beneficiaries appears stable and comparable with that for privately insured individuals...therefore, the commission does not see a reason to diverge from the current-law policy of no update for 2020,” MedPAC wrote.

Insurance Mergers and Expansions

In the last few years we have seen several insurance mergers and have recently seen two mega-mergers (Cigna with Anthem and Aetna with Humana) denied by the Department of Justice based on anti-trust laws. We are seeing fewer and fewer non-government carriers in the insurance realm. The newest trend seems to be expanding the insurance business lines into pharmaceuticals. Aetna was recently bought by CVS for $69 billion, and Cigna has proposed the purchase of Express Scripts for $67 billion. This would explain the fact that United Healthcare, the other major industry insurance company, now requires National Drug Codes (NDC) on all the pharmaceuticals that we bill.

With fewer and fewer players, the billing rules are becoming more demanding and the payments stingier. Negotiate your contracts wisely. We are data mining for the insurance companies to expand, while they pay less.

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Advancing Appropriate Use of Imaging: The imaging leader's guide to reducing costs and elevating total care quality

February 5, 2019 by Lea Halim. The Advisory Board Company is the owner and publisher of this article.

**Appropriate use is a holistic goal that focuses on improving the overall value of care**—which may require less, more, or different imaging, depending on clinical context. Appropriate use is more than curbing unwarranted utilization. Therefore, success in advancing appropriate imaging requires taking a broad view of the care continuum and collaborating with other service lines to identify opportunities.

**In an era of value-based care, advancing appropriate use imaging is a priority.** The aging of the US population is increasing utilization of acute healthcare services. But more and more of that volume, rather than generating revenue, falls on the health system's tab due to the increased prevalence of Medicare Advantage contracts that include financial risk, accountable care organizations, and private value-based plans. As a result, the cost of inappropriate utilization is becoming intolerable not only for payers and employers, but also for health systems themselves.

This research report provides top opportunities for imaging leaders and radiologists to deliver high quality care at a lower cost. For a copy of the report, please email the Advisory Board at ChurchS@advisory.com to learn how to:

- Curb inappropriate orders through systematic order checks and order-set revisions
- Ensure appropriate follow-up of incidental findings
- Hardwire appropriate imaging in care pathways

Interested in learning more about MBMS? Please contact Matt at mostrum@mbms.net