



American
Brain Tumor
Association



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Patient Advocacy Groups Urge Congress and President to Preserve Access to Medical Imaging

Certain Proposals Would Disrupt Rural Patient Access to Diagnostic Imaging; Rural Communities Would be Hit Hardest by Deep and Arbitrary Medicare Cuts

Patient Community Urges Congress to Support Policies That Ensure Patient Access to the Right Scan at the Right Time

Washington, DC – Patients and leading patient advocates from across the country, in partnership with the American Brain Tumor Association, Black Women’s Health Imperative, Colon Cancer Alliance, Lung Cancer Alliance and Society for Women’s Health Research gathered today at the U.S. Capitol to call on Congress to reject proposed deep and arbitrary reimbursement cuts to imaging services that would devastate patient access to life-saving diagnostics, particularly in rural communities throughout America.

These groups convened to officially submit a letter from fifteen leading patient advocacy groups to the Senate Finance and House Tri-Committees urging Members to adopt legislation that preserves access to diagnostic imaging.

The letter says that any “proposal to increase the utilization assumption for certain imaging equipment including CTs and MRIs will result in additional draconian cuts for imaging services. These additional cuts would come at a time when the GAO and other Medicare claims analyses have found that the deep cuts imposed by the Deficit Reduction Act have already significantly reduced Medicare spending on imaging (one analysis revealed that spending on advanced imaging is down 19.2%) and dramatically slowed the growth of advanced imaging services (the same study showed that the volume of these services has grown only 1.9% in the last year). Further cuts will undoubtedly reduce seniors’ access to these imaging services that are so important for detection, diagnosis and treatment.”

Patients and advocates today took their case to Capitol Hill to ensure their elected officials understand that medical imaging improves health outcomes and reduces health care costs. And that, as the letter states: “we are deeply concerned that additional unwarranted cuts to medical imaging will hamper our fight against these deadly diseases. Medical imaging is a powerful tool used in the prevention, detection, and treatment of our most serious diseases. We urge you to consider the value that these life-saving technologies bring to patient care as you work to enact reforms that improve the quality and efficiency of health care.”

The fifteen groups that signed the letter are: American Brain Tumor Association; American Federation for Aging Research; American Pain Foundation; Black Women's Health Imperative; Brain Injury Association of America; Breast Cancer Network of Strength (formerly Y-ME); Colon Cancer Alliance; Colorectal Cancer Coalition; Kidney Cancer Association; Lung Cancer Alliance; Men's Health Network; National Osteoporosis Foundation; National Ovarian Cancer Coalition; Society for Women's Health Research; and Us TOO International Prostate Cancer Education & Support Network.

Andy Spiegel, CEO of the Colon Cancer Alliance said that: “Diagnostic imaging services are integral to early disease detection, more precise diagnoses and effective therapies, saving both lives and money. I urge policymakers to acknowledge the importance of patient access to appropriate medical imaging services by rejecting arbitrary cuts to Medicare reimbursements that would inevitably lead to diminished access to the care patients need.”

“It’s very important that all patients have access to the medical imaging they need,” said Gordon Cole, a resident of Greensboro, North Carolina, a colon cancer survivor and activist in the Colon Cancer Alliance. “I understand first-hand the emotional turmoil of cancer and the critical role that innovative medical imaging technologies have in instilling confidence that your diagnosis is accurate and your treatment course is the best it can be. If this proposed legislation is passed, I fear that others in my situation might not be able to receive the same quick diagnosis and well-informed treatment that saved my life – I can’t even imagine doing that to someone.”

The Medicare reimbursement formula for medical imaging procedures is based on what is known as the utilization assumption -- the amount of time that imaging equipment operates during the hours a physician’s office is open for business. President Obama has recommended that the Centers for Medicare and Medicaid Services (CMS) dramatically recalibrate this reimbursement formula based on a 95 percent utilization rate assumption for advanced imaging equipment. Legislation introduced in the U.S. House would change the utilization assumption to 75 percent for advanced imaging equipment. The current utilization rate assumed CMS uses is 50 percent. If CMS drastically altered the Medicare formula by adopting either a 75 or 95 percent utilization rate assumption, it would amount to a deep and arbitrary reimbursement cut for diagnostic imaging services.

Both the President and House recommendations stem from a Medicare Payments Advisory Commission (MedPAC) recommendation that CMS adopt a 90 percent utilization rate for equipment costing more than \$1 million. This recommendation was based on a very limited survey of only two modalities (MR and CT) in six urban areas – completely excluding rural imaging centers – and was therefore not a representative national sampling of imaging utilization and does not offer an accurate picture of imaging use.

According to recent data, neither rural, nor urban, non-hospital diagnostic imaging providers operate equipment at rates anywhere near the levels that the President, MedPAC or the House bill recommends. A recent survey conducted by the Radiology Business Management Association (RBMA) shows that imaging equipment in rural regions of the country operates only **48** percent of the time an office is open, on average, while equipment in non-rural areas operates just **56** percent of the time.

“I urge my fellow lawmakers to consider the impact these legislative proposals would have on rural Americans,” said U.S. Rep. Parker Griffith (D-AL). “Access to quality health care, including modern advanced medical imaging procedures, is absolutely essential. Proposals such as an increase in the imaging equipment utilization assumption rate would severely cut reimbursements and limit access to these essential services in communities in my home state of Alabama and in many communities around the country.”

"Enormous health disparities already exist for Black women," said Eleanor Hinton Hoytt, president and CEO of the Black Women’s Health Imperative. “Many Black women and their families live in underserved and under-resourced communities. Increased access to life-saving diagnostic imaging services would greatly improve health outcomes in the African American community. Lawmakers at every level must reject arbitrary cuts to diagnostic imaging services that would reduce access to essential services for already underserved communities.”

Dramatically increasing the utilization assumption to a level significantly higher than actual use rates would result in a severe and unsustainable cut for imaging reimbursements. A recent analysis by The Moran Company demonstrates that Medicare spending on advanced imaging was reduced by 19.2 percent

from 2006 to 2007 and the rate of imaging volume growth has been declining since 2005 after the implementation of the DRA cuts. These additional proposed changes to the utilization assumption could reduce reimbursements by more than 20 percent across the board. The impact of this would be devastating for patients, causing congestion and delays at the point of care as well as denial of imaging services.

As a point of reference, Piedmont Imaging and Triad Radiology Associates, which provides imaging services in rural areas throughout the Piedmont-Triad region of North Carolina, will likely need to reduce or eliminate its rural services if these cuts are implemented. With the previously-implemented reimbursement reductions from the DRA, Piedmont Imaging Center's reimbursements were reduced an average of 20 percent for **all** medical imaging.

“Access to modern screening and diagnostic imaging tools is an issue of critical importance to women's health,” said Phyllis Greenberger, MSW, President & CEO of the Society for Women's Health Research Women. “Women rely on these procedures to give their health care providers accurate information so that they receive the best health outcomes. Now is not the time to make it more difficult for women to get the care they deserve.”

In addition to slashing reimbursements, President Obama's budget would also require Medicare to rely on Radiological Benefit Managers (RBMs) to evaluate doctors' requests for medical images. RBMs were established by health insurance companies to deny imaging services to patients and often employ insurance actuaries rather than medical doctors to determine the need for services.

“Early, accurate diagnosis is critical to improved outcomes for brain tumor patients,” said Elizabeth M. Wilson, executive director of the American Brain Tumor Association. “The ABTA supports affordable access to physician-ordered diagnostic imaging tests for patients with symptoms consistent with brain tumors.”

Rather than additional deep and arbitrary cuts to medical imaging which threaten patient access to care, the patient advocates said that Congress should promote the development and implementation of physician-developed appropriateness criteria to ensure the proper use of imaging while also reducing costs.

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