

Part B Insider (Multispecialty) Coding Alert

RADIOLOGY: Imaging Interpretations - Turf War or Patient Safety Issue?

Uncontrolled spending could lead to restrictions

A battle is brewing over who has the right to interpret imaging tests such as MRIs, CAT scans, ultrasounds and X-rays.

On one side are radiologists, who claim that they alone have the years of training to read these scans. Nonradiologists do a poor job of interpreting imaging tests, and have a built-in incentive to order too many tests because they own their own equipment, they say. On the other side, representatives of other specialties say patients will suffer if they have to wait for a radiologist to interpret their imaging tests.

There's more than professional prestige at stake here. Physicians, especially cardiologists and [Ob/Gyns](#), have been adding imaging services to their offices and reaping a massive new revenue stream. Imaging services have grown a staggering 9 percent per year, with MRI scans jumping 20 percent annually from 1992 to 2002, according to the **Medicare Payment Advisory Commission**.

Some experts speculate that the **Centers for Medicare & Medicaid Services'** recent clarification that diagnostic tests can't be billed incident-to was an attempt to reduce individual doctors' incentives to order such expensive tests (See PBI, Vol. 5, No. 23.) If diagnostic tests can't be billed incident-to, then each individual doctor can't receive bonuses based on the tests he or she ordered, under the Stark self-referral law.

And the Stark law may also offer a way to prevent nonradiologists from "self-referring" tests altogether, say radiologists (See story "Bar 'Self-Referrals' of Imaging Tests, ACR Urges CMS").

The barbs are already flying in this turf war. An opinion piece in the July 6 New York Times by radiologist **David Levin** calls for a federal law similar to one passed in Maryland, which prevents nonradiologists from putting MRIs or CAT scanners in their offices. He also calls for new federal inspection standards.

But nonradiologists already have struck back. A resolution to keep the current **American Medical Association** policy favoring a Stark exemption allowing physicians to refer to their own in-office imaging passed overwhelmingly at the June meeting of the AMA's House of Delegates, according to the **American College of Physicians**.