



## Original Article

## Public transparency Web sites for radiology practices: prevalence of price, clinical quality, and service quality information☆



Andrew B. Rosenkrantz\*, Ankur M. Doshi

Department of Radiology, NYU Langone Medical Center, New York, NY 10016 USA

## ARTICLE INFO

## Article history:

Received 5 October 2015

Received in revised form 10 November 2015

Accepted 18 November 2015

## Keywords:

Radiology practice

Price

Quality

Value

Transparency

## ABSTRACT

**Purpose:** To assess information regarding radiology practices on public transparency Web sites.**Methods:** Eight Web sites comparing radiology centers' price and quality were identified. Web site content was assessed.**Results:** Six of eight Web sites reported examination prices. Other reported information included hours of operation (4/8), patient satisfaction (2/8), American College of Radiology (ACR) accreditation (3/8), on-site radiologists (2/8), as well as parking, accessibility, waiting area amenities, same/next-day reports, mammography follow-up rates, examination appropriateness, radiation dose, fellowship-trained radiologists, and advanced technologies (1/8 each).**Conclusion:** Transparency Web sites had a preponderance of price (and to a lesser extent service quality) information, risking fostering price-based competition at the expense of clinical quality.

© 2016 Elsevier Inc. All rights reserved.

## 1. Introduction

Recent efforts to promote greater value in healthcare have fostered a surge of interest in transparency initiatives [1,2]. An ability to directly compare providers in terms of both quality and price is anticipated to influence informed decision making by patients regarding where to seek their care [3]. Such rational decision making by patients is encouraged by the increasing out-of-pocket costs that patients are facing for their healthcare, in part related to generally higher deductibles [4,5]. This behavior by patients, bolstered by the greater availability of information on which to base decisions, is expected to, in turn, drive providers in a competitive fashion to raise their offered value by improving quality, lowering costs, or both [6,7]. A primary mechanism for achieving transparency has been the development of Web sites that provide publicly available data regarding practices' price and quality [8,9]. Such Web sites offer an easy and straightforward way for cost-aware patients to become aware of regional benchmarks and perform "comparison shopping" among practices [3].

Concern has been raised regarding the current status of the transparency movement as relevant to radiology practices [3]. Specifically, there is the potential for imbalance between the level of mature,

comprehensive information regarding price and quality. Price information for individual imaging examination encounters in outpatient centers is readily extracted and summarized using automated processes [3,10]. On the other hand, methods for measuring and disseminating the quality of radiology practices remain immature in comparison with the quality information available for some other disciplines [3]. With some exceptions, currently applied schemes for assessing quality tend to rely on surrogate measures that do not directly relate to radiologists' diagnostic performance and are commonly poorly defined, applied inconsistently among practices, and unrelated to patient outcomes [11,12]. This disparity between price and quality information risks competition among radiology practices largely based on price, such that quality ultimately suffers as further investment by practices in quality becomes disincentivized [7]. In this framework, radiology practice becomes a commodity [13], with a push by centers to drive their prices as low as possible in order to gain market share.

Despite such concern, a systematic evaluation of the content of comparison Web sites as relevant to radiology practices remains lacking. Such an assessment could provide insights that guide radiology practices, as well as the specialty as a whole, in taking future actions to help achieve better overall value transparency. Therefore, we performed this study in order to assess the price and quality information regarding radiology practices that is available on public transparency Web sites.

## 2. Materials and methods

This study did not involve human subjects research and therefore did not require institutional review board approval. Two radiologists

☆ Conflicts of interest: All authors: No disclosures related to the work under consideration or outside of the submitted work.

\* Corresponding author. Department of Radiology, Center for Biomedical Imaging, NYU School of Medicine, NYU Langone Medical Center, 660 First Avenue, 3rd Floor, New York, NY 10016.

E-mail addresses: [Andrew.Rosenkrantz@nyumc.org](mailto:Andrew.Rosenkrantz@nyumc.org) (A.B. Rosenkrantz), [ankur.doshi@nyumc.org](mailto:ankur.doshi@nyumc.org) (A.M. Doshi).

**Table 1**  
Web sites included in study analysis on basis of providing price or quality information for individual imaging examinations at specific imaging centers in various geographic regions in the United States

Web site	Ownership	Price data	Quality/Service data	Providers may pay for enhanced listing features
<a href="http://www.okcopay.com">www.okcopay.com</a>	Private	*	*	
<a href="http://www.affordascan.com">www.affordascan.com</a>	Private	*	*	*
<a href="http://www.clearhealthcosts.com">www.clearhealthcosts.com</a>	Private	*		
<a href="http://www.newchoicehealth.com">www.newchoicehealth.com</a>	Private	*	*	*
<a href="http://www.medicare.gov/hospitalcompare">www.medicare.gov/hospitalcompare</a>	Federal government		*	
<a href="http://www.pokitdok.com/marketplace">www.pokitdok.com/marketplace</a>	Private	*		
<a href="http://www.saveonmedical.com">www.saveonmedical.com</a>	Private	*	*	*
<a href="http://www.yelp.com">www.yelp.com</a>	Private		*	*

\* Three additional Web sites providing suggested fair or average price or quality information for individual imaging examinations in various geographic regions in the United States, although not at the level of specific imaging centers, were not included: [www.castlighthhealth.com/price-variation-map](http://www.castlighthhealth.com/price-variation-map), [www.healthcarebluebook.com](http://www.healthcarebluebook.com), [www.nerdwallet.com](http://www.nerdwallet.com).

independently performed Internet searches using Google, Bing, and Yahoo to identify transparency Web sites that provide either price or quality information for individual imaging examinations at specific radiology centers in various geographic regions across the United States. Searches generally comprised a term related to radiologic imaging (i.e., *radiology*, *radiology center*, or a particular imaging examinations such as *MRI* or *knee MRI*) in combination with a term related to price or quality that patients may potentially search (i.e., *price*, *cost*, *best*, *top*, *cheap*, *compare*, *quality*, *best quality*, *highest rated*, *where to get*). Approximately, the first 100 search results resulting from individual searches were assessed for individual Web sites potentially meeting our study's inclusion criteria. Transparency Web sites referenced by news articles identified by the initial Web searches were also included. Web sites providing information for individual imaging examinations in various geographic regions, but not at the level of specific imaging centers, were recorded but not included for more detailed evaluation.

The two radiologists in consensus recorded the features of individual radiology practices provided by the Web sites. Content pertaining to the frequency of potentially unindicated “combination” computed tomography (CT) scans (i.e., combination CT scans of the brain and sinus or combination pre- and postcontrast CT scans of the chest), reflecting metrics incorporated in Medicare's Hospital Outpatient Quality Reporting Program [14], was inferred to provide information relating to CT dose. Features listed by a Web site as a search option, but that returned no centers when selected, were not counted. Recorded features were grouped by a number of broad categories: price, patient satisfaction, other aspects of the patient experience, radiologists' performance, and other aspects of quality. The radiologists also recorded additional content related to individual radiology practices that was identified on the Web sites, although not fitting within these categories. The number of Web sites providing information regarding individual practice features was computed, and the most commonly provided information was tabulated.

### 3. Results

A total of eight Web sites providing information comparing individual radiology centers, stratified by individual geographic regions across

**Table 2**  
Features of radiology practices reported by at least two of the included transparency Web sites

Number of reporting Web sites	Radiology practice feature
6/8	Price of imaging examination
4/8	Hours of operation (i.e., early morning, evening, and weekend hours)
3/8	ACR accreditation
	Internally developed value score
2/8	Capability for patient reviews in free-response form
	Radiologists on-site

the country, were identified (Table 1). The most commonly included information was the price of specified imaging examinations at individual imaging centers (six of eight Web sites). Provided information relating to patient satisfaction included the capability to enter reviews in free response form (2/8) and numeric patient satisfaction scores (1/8); one additional Web site provided patient satisfaction scores for the overall facility via Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) results, although not specifically for imaging services. Provided information regarding other aspects of the patient experience included hours of operation (4/8), WiFi availability (1/8), Spanish language availability (1/8), free parking (1/8), parking within 100 feet (1/8), wheelchair accessibility (1/8), provision of transportation (1/8), refreshments in the lobby (1/8), television in the lobby (1/8), and availability of images online or on DVD (1/8). Provided information regarding radiologists' performance included same- or next-day reports (1/8) and screening mammography follow-up rates (1/8). Provided information regarding other aspects of quality included American College of Radiology (ACR) accreditation (3/8), on-site radiologist (2/8), fellowship-trained radiologists (1/8), examination volume (1/8), imaging appropriateness (1/8), inferred radiation dose (1/8), availability of advanced imaging technology such as digital mammography (1/8), and physician portal (1/8). None of the Web sites provided information regarding radiologists' diagnostic accuracy. Three of eight Web sites provided an internally developed composite score reflecting a combination of price and quality factors (i.e., a “docometer” score provided by one site), although precise explanations were not given regarding how these hybrid scores were derived. Three of eight Web sites provided direct links for scheduling an appointment at specific imaging centers. Table 2 summarizes the most commonly available information across these various categories.

An additional three Web sites, not included in these eight, provided suggested fair or average prices for individual imaging examinations within specific geographic regions, although it did not provide information comparing price or quality between individual imaging centers within specific geographic regions.

### 4. Discussion

In this study, we assessed transparency Web sites providing public information regarding radiology practices. The most consistently provided information related to the prices of imaging examinations, which was reported by the majority of Web sites. Information relating to quality or service was provided by a minority of Web sites and most commonly related to patient satisfaction, scheduling, and ACR accreditation. A broad range of other aspects of the patient experience, for instance relating to parking or the waiting area, was also occasionally reported. Other, more clinically oriented, aspects of quality were less commonly reported, rarely related to radiologists' performance, and never related to diagnostic accuracy or clinical outcomes. These observations validate existing concerns regarding the imbalance between publicly available price and quality information for radiology centers.

Download English Version:

<https://daneshyari.com/en/article/4221257>

Download Persian Version:

<https://daneshyari.com/article/4221257>

[Daneshyari.com](https://daneshyari.com)