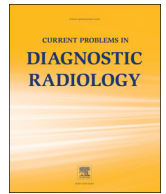




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Concierge and Second-Opinion Radiology: Review of Current Practices

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Radiology's core assets include the production, interpretation, and distribution of quality imaging studies. Second-opinion services and concierge practices in radiology aim to augment traditional services by providing patient-centered and physician-centered care, respectively. Patient centeredness enhances patients' understanding and comfort with their radiology tests and procedures and allows them to make better decisions about their health care. As the fee-for-service paradigm shifts to value-based care models, radiology practices have begun to diversify imaging service delivery and communication to coincide with the American College of Radiology Imaging 3.0 campaign. Physician-centered consultation allows for communication of evidence-based guidelines to assist referring physicians and other providers in making the most appropriate imaging or treatment decision for a specific clinical condition. There are disparate practice models and payment schema for the various second-opinion and concierge practices. This review article explores the current state and payment models of second-opinion and concierge practices in radiology. This review also includes a discussion on the benefits, roadblocks, and ethical issues that surround these novel types of practices.

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Introduction

The practice of radiology is often faced with new and recurring challenges; however, it adapts to accommodate each situation as needed. In the days of the film alternator, physicians lamented about the lag time between image acquisition and the release of a formal report. Following a proposal by the Healthcare Financing Administration that linked radiology interpretation and reimbursements only if it contributed to diagnosis and treatment, many radiology groups adapted to offering continuous coverage.¹ This allowed radiology to maintain its contribution to patient care and prevented specialists from billing for their own interpretations. Presently, declining reimbursements, bundled payments, and commoditization of imaging services has forced many radiologists to increase productivity by sacrificing the quality of reads. Because of these challenges, some radiology practices have adopted new payment models and services to meet the demands of today's health care system. This article serves to review the current practices of second-opinion and concierge radiology.

Second-Opinion Radiology

A typical radiologist may interpret 100–200 studies a day that can encompass the full spectrum of radiological examinations, including conventional radiographs, cross-sectional imaging, and

nuclear medicine. In addition to interpreting images outside an individual radiologist's subspecialty, the pressure to provide expedient turnaround times may lead to nondefinitive reporting (hedging), reporting errors, or recommendations for unnecessary follow-up imaging or intervention.

Second-opinion radiology attempts to clarify and confirm the initial interpretation through the process of an independent review by a board-certified radiologist with specific subspecialty qualifications. Interpretation services are offered for every modality, including radiography, computed tomography, magnetic resonance, nuclear medicine, positron emission tomography, and mammography. Second-opinion services are exchanged for a professional fee that is usually not covered by health insurance. Single-interpretation pricing or an annual subscription is available. [Table 1](#) summarizes the single-interpretation fee schedule for second opinions.

Images can be delivered to the second-opinion services by traditional (mail CD or digital versatile disc) or electronic (upload via web) delivery methods. Several second-opinion radiology services allow consumers to upload images onto an online, encrypted picture archiving and communication system, which are then sent to a subspecialty-trained radiologist for interpretation. The imaging study is interpreted within 24 hours or may take up to 10 business days depending on the volume of images sent and the complexity of the case. Patients are notified of the results via traditional or electronic mail. The Health Insurance Portability and Accountability Act Privacy Rule allows covered health care providers to communicate electronically, such as through e-mail, with their patients, provided that reasonable safeguards are in place, such as the use of data encryption.² Although the Privacy Rule does not prohibit the use of unencrypted e-mail for

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Table 1
Fee schedule for second-opinion and concierge radiology single-study interpretation report (in US dollars)

Company	XR	US	CT	MR	NM	PET
CompRad	100	150	200	250	NS	300
IRIS Radiology	30	NS	150	200	NS	NS
Johns Hopkins Neuroradiology	N/A	N/A	200	250	N/A	N/A
Massachusetts General Hospital	300	300	300	300	300	300
MetisMD	150	150	250	250	250	250
RadConnect	30	65	85	95	75	150
Radiology Response	300	300	300	300	300	300
Second Opinions	49	69	89	99	79	199
XMRI	29	69	89	99	79	199

CT, computed tomography; MR, magnetic resonance; NM, nuclear medicine; NS, nonsignificant; PET, positron emission tomography; XR, x-ray; US, ultrasound.

treatment-related communications between health care providers and patients, other safeguards should be applied to reasonably protect privacy, such as limiting the amount or type of information disclosed through the unencrypted e-mail. For an additional fee, patients have the option of discussing the report with a radiologist by telephone or video conference chat. There are other concierge and second-opinion models that provide a multidisciplinary review of patient medical records in addition to imaging. Those services often have a longer turnaround time and occasionally include a virtual or in-person consultation. Translation services are also available.

There are several companies offering second-opinion services, which are predominantly teleradiology companies, although a few academic groups such as Johns Hopkins and Massachusetts General Hospital have also entered the market. In addition to marketing to patient and nonradiologist consumers, second-opinion companies also offer services to solo practice radiologists and attorneys. Radiologists may use these services on a case-by-case basis, such as a consultation for a difficult case or for quality assurance purposes. A radiologist may also purchase a subscription in an effort to offer subspecialty coverage outside an individual's expertise. Second-opinion services can also tailor their services for law offices and insurance companies, such as in cases of expert witness, worker's compensation, and malpractice. Most second-opinion services subjectively evaluate the quality of the study. A summary of services provided is listed in [Table 2](#).

Concierge Radiology

Concierge medicine is a unique practice model in which patients pay physicians annual retainer fees or membership fees in exchange for improved access and service. Primary care

Table 2
Services offered by private, community, and academic radiology practices

Company	Second opinion report	Patient-oriented report	Phone consult	Video consult	Legal services
CompRad	X				X
IRIS Radiology	X				
Johns Hopkins Neuroradiology	X				X
Massachusetts General Hospital	X				
MetisMD	X	X	X	X	X
RadConnect	X				
Radiology Response	X	X	X	X	
Second Opinions	X				
XMRI	X		X		X

physicians have adopted concierge methodologies to their practices to diversify health care offerings, connect more intimately with their patients, and provide additional revenue streams in the era of decreasing reimbursements. Presently, internal medicine, pediatric medicine, and family medicine groups offer concierge care. This model was first developed in Seattle, Washington, in 1996 by 2 physicians who created the company MD² (MD squared).³ The first concierge service to be offered at an academic center was in 2000, largely in response to the loss of several benefactors to MD².⁴ This payment model helps address both the physician's concern of an overbearing workload and the patient's concern for improved care.⁵ Services rendered include but are not limited to same-day appointments, longer examination times, and 24-hour access to physicians.⁶

Radiology groups have been faced with similar pressures of a heavy workload combined with declining reimbursements, forcing some to become innovative with their services. Additionally, the transformation of a patient into a health consumer has led to an increased demand for high-quality service. These factors have contributed to the rise of concierge radiology. Concierge radiology is a service offered by a radiology group to nonradiologist physicians and patients, in which 24-hour direct access to an appropriate subspecialty-trained radiologist, dedicated resources, and a standard turnaround time for image interpretation are provided. Therefore, concierge radiology acts as an intermediary between traditional fee-for-service and value-based care.

In addition to providing second-opinion radiology reports, a few of these companies tailor their reporting styles to patients. Annotated images with multimedia links along with a clear, patient-oriented reporting style make these companies an attractive option for patients ([Fig](#)).⁷ This reporting style is also attractive to physicians who wish to accurately counsel their patients on the imaging findings. Video conference consults for physicians and patients are also available readily or can be scheduled for a future time when more convenient for the consumer.

Some established radiology practices have begun to offer concierge-like services to patients by offering same-day results and in-person consultation with a radiologist.⁸ Other groups have established patient consultation clinics that allow nonradiology physicians to schedule their patients for review of their imaging by a board-certified and subspecialty-trained radiologist.⁹ This experimentation of remote, virtual, and in-person concierge practice will likely continue as radiology practices strive to diversify their outreach and patient payer mix.

Benefits

Second-opinion and concierge services offer many benefits to patients. A second opinion may lead to an improved understanding of an individual's disease, which could allow for a more autonomous decision before undergoing surgical or medical therapy.^{10,11} When obtainable, an accurate diagnosis can save the patient money and time that would have been spent on pursuing further diagnostic testing or intervention. In a retrospective study at an academic tertiary care center performing a second opinion on cases of head and neck cancer, Lysack et al¹² demonstrated a change in cancer staging in 56% (53 of 94 total cases). Although prior research has demonstrated that patients prefer receiving the results of radiological examinations from their primary physicians, it is conceivable that a patient may prefer a second-opinion consultation directly from a radiologist, especially if the study result was abnormal.^{13,14} Patients may report increased satisfaction in their care when provided the options to review imaging with a radiologist.¹⁵

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