Neiman News

HPI
HARVEY L. NEIMAN
HEALTH POLICY INSTITUTE

Happy fall to our ACR members! I am excited for the opportunity to present an update on the latest insights from the Harvey L. Neiman Health Policy Institute® (HPI) at the ACR® Board of Chancellors (BOC) meeting in a few days. I extend my thanks to our Chairman, Alan Matsumoto, MD, MA, FACR, for this opportunity. This newsletter covers our research from the last quarter that will be also included in the BOC briefing.

I'm particularly excited about the new study testing an alternative payment model in radiation oncology that resulted from our Harvey L. Neiman Grant. The timing of this publication was ideal — the new model that would replace the defunct Radiation Oncology Alternative Payment Model developed by the Centers for Medicare and Medicaid Services (CMS) was recently proposed to Congress. See the expert spotlight with authors Aaron Bush, MD, and Mark Waddle, MD, of Mayo Clinic to learn more.

I'd like to thank the ACR Bulletin for the continued opportunity to write a column that summarizes policy issues and key insights and evidence from the HPI that can shape future policy. In the most recent **Research Rounds** column, I discuss the imaging volume growth that is contributing to the radiology workforce shortage and policy that could safeguard patient access.

See below for other new studies on access to supplementary breast screening, practice consolidation in radiology and an evaluation of imaging market share by radiologists versus other specialties. There is also a link to a novel study by the HPI Prime Center at Northwell Health about heat vulnerability and the association with stroke severity — an important topic amidst global climate change.

Finally, we just released a new grant opportunity through the HPI and we hope to have another year of high quality applicants! You can stay up to date with HPI research and new opportunities at **neimanhpi.org** and **X (formerly known as Twitter)**.

Elizabeth Rula, PhD
Executive Director, Harvey L. Neiman Health Policy Institute

Top News

Neiman Institute Accepting Applications for Grants Program

The HPI is accepting applications to support novel research that will inform policy that promotes the effective and efficient use of healthcare resources for improving patient care. Grant topics include payment models, AI/emerging technology and practice advancements to improve efficiency, outcomes or equity.

This year there will be two awards, and we are offering a new model of support. The

Harvey L. Neiman Grant, as in prior years, provides funding for an investigator to conduct their research project independent of the HPI. The Richard Duszak Jr. Award now will offer an opportunity for ACR member(s) to propose a high-priority collaborative study, and to work with an HPI researcher who will execute the analysis of the proposed aims using HPI's extensive claims databases. **Apply by Feb. 3, 2025**

Women Travel Nearly 3 Times as Far for Supplemental Breast MR or Ultrasound Than for Mammography

Given new breast density guidelines, now approximately one in two women (those who have dense breast tissue) are recommended to have supplemental breast cancer screening by breast MR or ultrasound due to higher breast cancer risk, but whether supplemental imaging is accessible to women isn't known. The new HPI research, published in the **American Journal of Preventive Medicine**, measured patient distance to the nearest facility offering mammography, breast MR and/or breast ultrasound to assess the relative extent of this barrier to access and to inform approaches to mitigate disparities.

The results found that a patient's distance to a facility providing breast MR or ultrasound was nearly 3 times further, on average, than the distance to a mammography center. The relative distance varied by community socioeconomic status and urbanicity. The women living in the most socioeconomically disadvantaged ZIP codes were further from breast imaging facilities compared with individuals living in the most advantaged areas.

"Breast MR is now recommended as an additional screening tool for the 50% of women with dense breasts. When breast MR is not available or contraindicated, breast ultrasound and/or contrast-enhanced mammography can be recommended as supplemental imaging techniques as well," stated Bhavika K. Patel, MD, Vice Chair of Research at Mayo Clinic Arizona. "The results of our study indicate there either needs to be a way to reduce the differences in access to breast MR or avail all patients of effective alternatives to promote early detection and improve outcomes." **Read the summary**

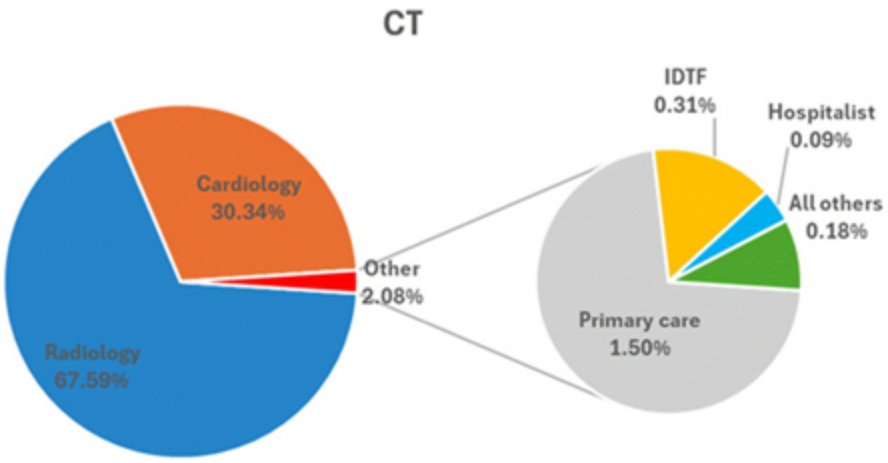
Consolidation Patterns of Practices With Radiologists Through 2023

A recent HPI study, published in the American Journal of Roentgenology, evaluated indicators of practice consolidation, including practice closures and changes in practice size, number of radiologists and specialty mix over a decade. The results showed that from 2014 to 2023, the number of medical practices with affiliated radiologists decreased 15% even though the number of radiologists increased 17%. The average number of radiologists per practice increased from nearly 10 to 18 over the ten years.

"Our study inferred how consolidation is occurring by examining radiologists' practice affiliations before and after their prior practice ceased. Among radiologists affiliated with mid-sized radiology-only practices (with 50+ radiologists) that ceased, a majority (55%) were next affiliated with a broad multispecialty practice without any majority specialty among physicians," said Jay Parikh, MD, coauthor and Professor at the University of Texas MD Anderson Cancer Center. "The observed patterns are consistent with increasing consolidation of practices into larger practices — both among radiology-only practices, and into/between multispecialty practices." **Read the summary**

Imaging Market Share Analysis Shows 28% of Image Interpretation Performed by Non-Radiologists

New HPI research published in the Journal of the American College of Radiology found that radiologists interpreted 72% of all imaging studies for Medicare fee-for-service beneficiaries, with the remaining 28% performed by other types of clinicians. Market share varied by imaging modality; radiologists interpreted 97% of computed tomography and 91% of magnetic resonance. The research was based on 123 million Medicare Part B imaging claims in 2022. **Read the summary for full specialty breakdown**



Expert Spotlight

Aaron Bush, MD

Radiation Oncology Case Rate Program Produces Upfront Medicare Savings With Goal of Reimbursement Stabilization

The Radiation Oncology Case Rate (ROCR) Value-Based Payment Program Act (S. 4330/H.R. 8404) is a bipartisan bill recently introduced to Congress, which aims to shift reimbursement for radiation-related services from fee-for-service to episodic payments. The ROCR legislation strives to improve upon the Radiation Oncology Alternative Payment Model (RO-APM), which was indefinitely delayed by CMS following concerns that its complex payment methodology would threaten the economic viability of radiation oncology practices and jeopardize patient access.

Funded by a **Harvey L. Neiman Grant** from the HPI, radiologist-researchers Mark Waddle, MD, of Mayo Clinic Rochester and Aaron Bush, MD, of Mayo Clinic Florida set out to provide evidence that could pave a path forward for value-based payments in a model that would also be sustainable for RO practices.

“The proposed ROCR program continues to incentivize value over volume by encouraging the adoption of evidence-based abbreviated treatment regimens. Key changes from the stalled RO-APM, such as the removal of arbitrary quality withholds and the inclusion of annual inflationary updates, may alleviate some concerns that episode-based payments

would fail to cover the costs to deliver care," said Dr. Bush.


Mark Waddle, MD

The research led by Drs. Bush and Waddle demonstrated the impact that the ROCR program could have on reimbursement. This was accomplished by using multiple years of electronic medical record data from Mayo clinic, and then validating the findings using a 5% representative sample of national Medicare Fee for Service claims analyzed by HPI researchers. The **new study**, published by the International Journal of Radiation Oncology-Biology-Physics, estimated the ROCR program would produce Medicare savings of up to 3% across 15 cancer types compared to historical Medicare Fee-for Service payments.

"ROCR is a strictly legislative proposal; therefore, projected Medicare savings would be required to gain Congressional support. The magnitude of savings adjustments may warrant further consideration by policymakers given both the small relative contribution of radiation oncology to overall Medicare spending as well as the need to preserve patients access," said Dr. Waddle, Mayo Clinic Rochester.

Per Dr. Bush, "Projecting the net financial impact of the ROCR program beyond 2024 demands consideration of trends in hypofractionation, anticipated Medicare Physician Fee Schedule payment cuts and ongoing inflation rate increases. ROCR may result in long-term reimbursement stabilization by negating each of these factors."

Furthermore, the results also show significantly higher historical costs of up to $7,417 for curative versus palliative treatments, and up to $3,917 for later stage cancer. According to Dr. Bush, "The ROCR program's use of a single base payment rate may not be equitable for centers with a greater proportion of advanced stage cancer patients for which curative treatment is costlier. In the future a base rate modifier could account for cancer stage and treatment intent."

Additional New Studies

Association Between Heat Vulnerability Index and Stroke Severity
International Journal of Environmental Research and Public Health

Ten-Year Trends, Disparities and Clinical Impact of Stroke Thrombectomy and Thrombolysis: A Single Center Experience 2012–2021
Journal of Stroke and Cerebrovascular Diseases

Upcoming Events

HPI-AIRP® Healthcare Delivery & Policy Research Course | Virtual | Oct. 21–Nov. 15
"Highly informative and useful course. It inspired me to further pursue informatics research as one of my career aspirations." — Resident attendee

© 2024 Harvey L. Neiman Health Policy Institute | All rights reserved.
1892 Preston White Dr., Reston, VA 20191

If this message is not displaying properly, view in web browser.
Update your email preferences or unsubscribe | Forward | Privacy Policy