

REDUCED IMAGING REIMBURSEMENTS HARM CARE

Fifteen cuts to medical imaging since 2006 have hurt patient access and undercut the benefits of early detection. Additional reimbursement cuts and prior authorization proposals will create more barriers to life-saving medical imaging services that could threaten seniors' health and well-being.

15

DEEP CUTS Imaging spending and utilization has declined.



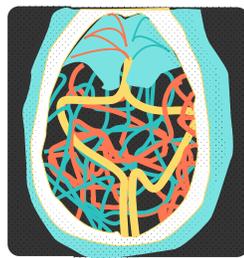
16.7%

Medicare per beneficiary spending on medical imaging decreased by 16.7% since 2006.¹



5.12%

Medicare utilization of medical imaging has declined by 5.12% in 2009.¹



60%

Payments for some services, like MRIs of the brain, have been cut by more than 60%.¹

Medicare spending on non-imaging services grew 21.3% since 2006.¹

15 cuts to medical imaging reimbursement since 2006

PRIOR AUTHORIZATION & COVERAGE DELAYS



Nearly two-thirds (63%) of physicians typically wait several days to receive preauthorization from an insurer for tests and procedures.²



More than half (52%) of physicians report appealing 80% or more of insurer rejections on first-time preauthorization requests for tests and procedures.²



Nearly half of physicians (43%) report that first-time preauthorization requests are "often" reviewed by an insurer representative without medical training.²

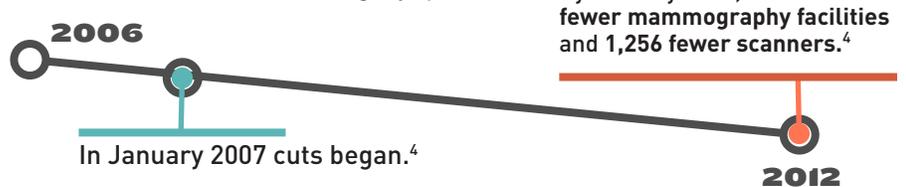


In a study of 4,360 Patient Advocacy Foundation imaging cases from June 2007 to June 2011, patients waited an average of 7.5 working days for coverage decisions for scans.³

PATIENT HEALTH THREATENED

Further cuts to advanced medical imaging reimburses will make it harder for doctors—and their patients—to access lifesaving technologies.

Decreased Access to Mammography



FOR EXAMPLE:

800,000

fewer DXA bone density screenings between 2007 and 2009.⁴

Those tests may have prevented approximately 12,000 fractures.⁴



SOURCES

1. <http://www.medicalimaging.org/policy-and-positions/reimbursement/>
2. <http://www.ama-assn.org/ama1/pub/upload/mm/399/prior-authorization-survey-highlights.pdf>
3. <http://www.medicalimaging.org/wp-content/uploads/2012/04/MITA-PAF-Imaging-Report-Summary-4-23-12.pdf>
4. <http://content.healthaffairs.org/content/30/12/2362.abstract>

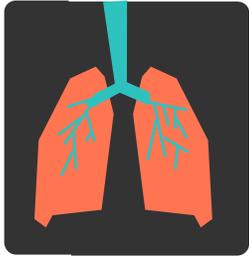


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MEDICAL IMAGING LOWERS COSTS AND SAVES LIVES

Innovative medical imaging technologies are allowing doctors to detect, diagnose, stage and treat patients earlier than ever before. These imaging innovations also provide more precise and personalized detection, lower costs for patients and the healthcare system and save lives.

MORE PRECISE AND MORE PERSONALIZED DETECTION



CT scans can reduce lung cancer deaths by 20% in high-risk populations.¹



PET scans have changed the course of treatment in more than 36% of cases.²



MRI scans & ultrasound combined with annual mammograms resulted in higher breast cancer detection in women with risk factors.³

PROVEN COST SAVER



EVERY \$1 ON INPATIENT IMAGING = \$3 IN TOTAL SAVINGS⁴

\$385 SAVES 1 DAY IN HOSPITAL

Every \$385 spent on imaging decreases hospital stay by one day = \$1,172 per day in savings.⁴

2X

Patients who had non-invasive CCTA scans were twice as likely to be discharged from the hospital, potentially saving billions of dollars for the healthcare system.⁵

REDUCING MORTALITY



CT scans reduced unnecessary surgeries for elderly patients with suspected appendicitis and lowered mortality by 3%.⁶



40%

of the decline in cancer mortality is due to diagnostic imaging innovation.⁷



SOURCES 1. National Lung Screening Trial Research Team. Reduced Lung-Cancer Mortality with Low-Dose Computed Tomographic Screening, *N Engl J Med*. 2011 Aug 4;365(5):395-409 | 2. Hillner et al. Impact of Positron Emission Tomography/Computed Tomography and Positron Emission Tomography (PET) Alone on Expected Management of Patients With Cancer, *J Clin Oncol*. 2008 May 1;26(13):2155-61 | 3. Berg et al. Detection of Breast Cancer with Addition of Annual Screening Ultrasound or a Single Screening MRI to Mammography in Women with Elevated Breast Cancer Risk, *AMA*. 2012;307(13):1394-1404. | 4. Beinfeld et al. Diagnostic Imaging Costs: Are They Driving Up the Costs of Hospital Care? *Radiology*. 2005 Jun;235(3):934-9 | 5. Litt et al. CT Angiography for Safe Discharge of Patients with Possible Acute Coronary Syndromes, *N Engl J Med* 2012; 366:1393-1403 | 6. Lang et al. Lifetime and treatment-phase costs associated with colorectal cancer: evidence from SEER-Medicare data, *Clin Gastroenterol Hepatol*. 2009 Feb;7(2):198-204 | 7. Lichtenberg, Frank R., Has Medical Innovation Reduced Cancer Mortality? [April 2010]. NBER Working Paper Series, Vol. w15880, pp. -, 2010.