

RADPEER™ FAQs

Q. How much does it cost to participate in RADPEER™?

A. Cost is based on the number of participants and is a yearly fee:

2-5	\$800
6-15	\$1500
16-25	\$2200
26-35	\$3000
36-45	\$3800
46-55	\$4600
56-65	\$5400
66-75	\$6200
76-85	\$7000

Q. How do you maintain confidentiality?

A. Each group is assigned a number by the ACR, such as group ID 202. The group then assigns each physician a number (known only to the group) such as physician # 102. The ACR does not know the individual physicians' identifiers and the group number is known only to the ACR. Each participant is assigned an initial password that must be changed at time of first login.

Q. How many cases do I have to review in a year?

A. At the present time, The ACR does not require submission of a minimum number of reviews per physician. Your group may elect to choose a target number for RADPEER™ submissions as part of your internal quality assurance program, but the number submitted is your option and not a mandatory one.

Q. How does the process work?

A. The RADPEER™ process is conducted while routine interpretation of current images is being done. If there are prior images of the same area of interest when a new study is being interpreted, the report of the previous study will be reviewed and its accuracy will be scored by the reviewer using a standardized 4-point rating scale.

Q. What is the scoring?

A. 1 = Concur with Interpretation

*2 = Discrepancy in Interpretation/not ordinarily expected to be made
(understandable miss)*

3 = Discrepancy in Interpretation/should be made most of time

*4 = Discrepancy in Interpretation/should be made almost every time – misinterpretation
of findings*

Scores 2b, 3, and 4 will have the option of choosing-

a. unlikely to be clinically significant

b. likely to be clinically significant

Q. What should we do with 2b, 3, and 4?

A. Scores of 2b, 3, and 4 should be sent for internal arbitration, for example, review by Chair/Medical Director or QA committee before being sent to the ACR.

Q. Are there benchmarks established for the scores?

A. No, but when you access the group's report, you will have comparison data so you can compare your scores to all other RADPEER™ participants.

Q. How often will I receive a report?

A. The group administrator can access the reports online at any time.

Q. What if my group covers several different facilities?

A. RADPEER™ is the group's quality assurance program and covers them for all modalities at all locations where they provide service.

The reports generated will be based on each group practice location as long as the group adds their sites to the online group account. This is optional and the site tab will be added to the account if indicated on the application.

Q. How long has RADPEER™ been operational?

A. RADPEER™ was piloted in 2002 and offered to all in 2003. The online process went live in August 2005.

Q. How can I be sure that the information is confidential?

A. RADPEER™ reports are privileged and confidential peer review information. Release or Disclosure is prohibited in accordance with 8.01-581.17 Code of Virginia

Q. How does the Initial Application process and “start up” work?

*A. When the ACR receives the RADPEER™ application and fee:
The group administrator and point of contact will each receive a letter that details the initial login information. This is generally received within one week of receipt of application and fee.*

Q. I am in solo practice. How can I participate in RADPEER™?

A. RADPEER™ is only effective if there is more than one physician to complete reviews of previously interpreted studies. If you are in solo practice, we suggest that you develop a documented peer review mechanism for evaluation of the accuracy of interpretation of examinations, perhaps through use of locum tenens (when providing vacation coverage) or agreement with a local academic facility.

Q. Do the new peer review requirements apply to Mammography?

A. No, the new peer review requirements apply to CT, MR, Nuclear Medicine, PET, Ultrasound and Breast Ultrasound. Mammography, stereotactic breast biopsy, ultrasound-guided breast biopsy, Breast MRI, and radiation oncology are not included. Breast imaging facilities are welcome to participate in RADPEER™ but it is not mandatory.

Q. What about HIPAA?

A. We do not collect any Protected Health Information (PHI); no patient information is transmitted to the ACR so patient confidentiality is not an issue.