A co-management agreement helps one North Carolina radiology practice achieve its quality goals.

By Amena Hassan

Read more about Asheville Radiology’s R-SCAN experience.

With new Medicare reimbursement models placing a greater emphasis on value over volume, Asheville Radiology Associates, located in Asheville, N.C., recognized the need for specialized, dedicated oversight to achieve its quality goals. Asheville Radiology and the health system it serves, Mission Health, entered into a co-management agreement, assigning medical directors throughout the region, including at rural hospitals.

Since Mission Health comprises six hospitals and several ambulatory radiology locations spread across a wide geographic area, maintaining quality standards is a challenge. Indeed, quality and safety improvement requires individualized implementation measures, as many of the facilities have specialized workflows, variations in clinical coverage, and facility differences.

In early 2015, the hospital system and Asheville Radiology jointly hired a full-time quality specialist, James Murray, to focus on improvement. Murray, who serves as director of quality and safety at Asheville Radiology, was also one of the practice’s chief allies in the effort to incorporate ACR’s Radiology Support, Communication and Alignment Network (R-SCAN™).

Based on a growing list of Choosing Wisely® topics, R-SCAN is a collaborative clinical improvement activity that ensures referring clinicians and radiologists provide patients with the most appropriate imaging exam. It includes free access to the ACR Select™ clinical decision support (CDS) tool.

Murray presented R-SCAN at board meetings and to the Medical Directors Committee, explaining the value radiologists can bring to patient care when they connect with their ordering providers.

Beyond the advantages of using R-SCAN as a bridge to the CDS era, practice leaders also perceived that R-SCAN could help position them to qualify for value-based reimbursements in the near future. According to Murray, the group is gathering data from R-SCAN to potentially satisfy the Improvement Activities category of the Merit-based Incentive Payment System (MIPS).

Examples of early success include the minimization of unnecessary exams; a reduction in administrative “reworks” in the system, such as order cancellations and modifications that impact both providers and support staff; and ordering the right exam from the outset, thereby reducing the time for exam preauthorization, which Murray finds particularly consequential. Murray pictures a future where providers further utilize appropriate imaging, and one where patients receive earlier and more accurate diagnoses. “R-SCAN affords us the ability to quantify a small sampling of data for the individual ordering providers who participate,” Murray adds.

Murray reflects on Asheville Radiology’s experience with R-SCAN this way: “Not only is our team able to impact quality and safety organization wide, but we are able to lead system implementations that will further the health system’s goal to provide every patient with their desired outcome.”

R-SCAN participants have several options for defining their own R-SCAN topic to meet unique practice needs. There are several approaches to carrying out a practice-defined topic. Some of these, such as combining several topics from the Choosing Wisely list, may be especially desirable for small and rural practices that have limited volume for any one imaging exam. Please see these instructions for more details.

Join the Discussion

Want to join the discussion about how co-management agreements can help radiologists achieve their quality goals? Let us know your thoughts on Twitter at #imaging3.

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