

# Most Valuable (Radiology) Practice

*Strategies and practices to catch the vision of Imaging 3.0™ in your practice*

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Radiology is integral to the health care system, a powerful component of the care team. While few doubt the results radiology brings to health care, radiologists face challenges in communicating their specialty's value to referring physicians, patients, payers, and administrators. Imaging 3.0 supports radiology groups that understand the challenges of today and are ready to move forward. This action plan will assist practices in charting a course through the challenges and opportunities in our evolving health care system.

## The Clinical Setting

As radiologists, we must ensure that we are safely and accurately performing the most appropriate radiology procedure for each patient and efficiently delivering our reports. Radiologists enhance value by embedding themselves in clinical care pathways and direct patient care.

As we establish ourselves as integral members of the medical community, referring physicians will recognize radiologists as the prime arbiters of imaging appropriateness. Should questions arise, referring physicians should directly consult with radiologists to determine how imaging can provide maximal value and outcomes for patients. Radiologists should prioritize maintaining collegial relationships with their referring physicians by being available, courteous, professional, helpful, and knowledgeable. We must also seek opportunities to interact with patients, both during their imaging examination and, if appropriate, to explain their results. During the report phase, we are responsible for delivering timely, precise, and actionable information to referrers and patients, incorporating all relevant clinical and biomarker data using a succinct, structured, and standardized lexicon. We need to expeditiously communicate unusual, unexpected, and [critical results](#).

Radiology must complete the puzzle for patients and referring physicians, not simply describe the puzzle pieces and suggest clinical correlation. We [add value](#) by analyzing the imaging findings in light of the clinical and imaging history and rendering a diagnosis. Patients present questions, and radiologists should supply answers.

## **Referring Physician Collaboration**

Provide value to your referring physicians by doing the following.

- Be available for consultation in advance of imaging to help determine the right test for the right patient at the right time. Encourage referring colleagues to use [clinical decision support tools](#) when ordering imaging. Proactively share updated ACR Appropriateness Criteria® with referring clinicians.
- Sign up to participate in the [R-SCAN™](#) (Radiology Support, Communication and Alignment Network) initiative.
- Provide consult services for patients and referring physicians as needed, which brings radiologists and referring clinicians together to improve imaging appropriateness based upon a growing list of imaging Choosing Wisely topics.
- Report and manage incidental findings according to evidence-based literature in a timely fashion.
- Include radiologist [contact information](#), such as emails and phone numbers, on each report.
- Collect clinician cell phone numbers and make efforts to contact them personally regarding significant findings. Use cell phone numbers for protocolling/modifying ordered studies.

## Additional Resources

[ACR Appropriateness Criteria](#)

[AMA-ACR Steps Forward Module on Clinical Decision Support and Diagnostic Imaging \(with free CME\)](#)

[Radiologist: Clinical Imager or Ancillary Medical Staff?](#)

[The Network Effect: Forging Connections Through Education](#)

[Here's Why You Should Pay Attention to Clinical Decision Support](#)

[Connecting With Colleagues](#) (in the *ACR Bulletin Stakeholder Special Issue*)

[The Perfect Radiology Report](#)

## Patient Encounter

Prioritize these items to optimize patients' experience with radiology.

- Simplify scheduling, parking, interactions with staff, and instructions for pre-exam preparations. Provide patient information materials with meaningful points of contact. Take extra time to consult with patients regarding procedures, making sure they clearly understand the basics and that all of their questions are answered.
- Ensure that radiologists are proactively seeking opportunities to interact with patients. Be available to answer patient questions and ensure they understand the purpose of the exam and know what to expect. Dedicate time in radiologist schedules to make this possible.
- Make your practice welcoming for all patients from diverse backgrounds.
- Manage utilization by advocating for the use of imaging appropriateness criteria, such as through tools like [ACR Select™](#).  
Create precise protocols with minimal redundancy and variation for general and routine studies and alter as needed.
- Consult patient history before encounter and during image interpretation. Make use of digital image records and electronic medical records.
- Optimize radiation dose to keep levels as low as reasonably achievable. Access resources through [Image Gently®](#), [Image Wisely®](#), and [Choosing Wisely®](#). Benchmark outcomes and processes of care through the [National Radiology Data Registry \(NRDR™\)](#).
- Provide quality interpretations by understanding the question to be answered, understanding the history, carefully reviewing the images, and communicating clearly.
- Employ reporting tools, such as [atlases](#) (e.g., ACR [BI-RADS Atlas®](#)), [structured reporting](#) templates, [decision support](#), and [RadLex](#).
- Take steps to ensure accurate interpretations. Hire ABR-certified radiologists, approach [CME](#) strategically, and prioritize [peer review](#) using tools like [RADPEER™](#).

## Additional Resources

[Patient-Centered Imaging: Opportunities and Challenges](#)

[Patient Advocate Q&A](#)

[What if All Our Patients Were Friends or Family?](#)

[Patient Satisfaction: Opportunities for Quality Improvement](#)

[ACR IT Reference Guide: Reporting and Communication](#)

[Empowering Patients](#) (in the *ACR Bulletin Stakeholder Special Issue*)

[Imaging 3.0 Case Study: A Community Toolkit to Reduce Pediatric Radiation](#)

[Traveling Toward Patient-Centered Care](#)

[RadiologyInfo.org](#)

## Value Proposition

Radiology's stakeholders span the entire patient-care continuum. We must provide value to (and communicate that value to) our patients, medical staff, health care administrators, and payers.

### Patients

- Work with [Consumer Assessment of Healthcare Providers and Systems \(CAHPS\)](#).
- Coordinate directly and proactively with hospital administration and staff to improve patient experiences.
- [Integrate radiologists](#) into the patient care experience.
- [Measure patient satisfaction](#) to potentially qualify for financial incentives.
- Communicate directly with patients through the radiology report and image archive. Help patients participate in informed decision-making.
- Take the [Radiology Cares pledge](#) to make patients the primary focus of radiologic care.
- Help guide optimal patient and referring provider decision-making by promoting and utilizing [evidence-based recommendations](#) on radiologic procedures. Conform recommendations to ACR best practice standards.
- Deliver timely, accessible, accurate, and meaningful [imaging reports](#). Provide practical explanations, as needed, of these reports for common understanding between physicians and patients. Include [contact information](#), such as email and direct phone number, on each report.
- In waiting areas, display radiology-specific information, such as the photos and bios of staff radiologists, Joint Commission Speak Up posters, and ACR accreditation information.

### Additional Resources

[Launching a Radiology Consultation Clinic](#)

[Radiologists Get a Lesson in Conveying Empathy to Patients](#)

[Seeing Eye to Eye](#)

[The Difficult Patient](#)

**Medical Staff** (i.e., technologists, nurses, mid-level providers, students, residents, fellows, referring physicians, medical physicists, etc.)

- [Be a leader in your department](#). Engage, support, and educate medical staff about the critical role of imaging in patient outcomes.
- [Educate your colleagues](#) on high-quality imaging, appropriateness, and patient care.
- Inform medical staff about radiation safety initiatives, like [ALARA](#), [Image Wisely](#), and [Image Gently](#). Encourage staff to share RadiologyInfo.org with patients.
- Appoint a [radiation safety officer](#) trained to respond to a radiation accident or terror attack.
- Keep your colleagues informed about technical and interventional advancements.
- Make yourself available to medical staff for consultations via email, phone, and in person.
- Ensure referring physician satisfaction through [surveys](#), interviews, and follow-up contact.
- Guarantee timeliness of reporting. Consider putting together an innovative call center to improve communication (e.g., [Columbus Radiology](#)).
- Work closely with medical physicists to optimize radiation dose using the most appropriate equipment, software, and protocols. Review data periodically to determine if any changes are necessary. Participate in the [ACR Dose Index Registry](#).

### Additional Resources

[Building a Better Team](#)

### **Health Care Administration (i.e., hospital, clinic, accountable care organization)**

- Stay informed on the organization's direction and challenges.
- Explicitly support the organization's mission and vision.
- Help the organization develop, maintain, and improve relationships with physicians and patients. Be actively involved in key organizational efforts and initiatives, such as cost reduction goals, lean [kaizen](#) events, patient safety huddles, time-outs, and hand-washing programs.
- Actively participate in hospital-wide quality and efficiency initiatives.
- Take a leadership role in efforts related to clinical decision support, computerized physician order entry, meaningful use, and ICD-10.
- Participate in population health management initiatives to demonstrate compliance and show shared values. Get started with [R-SCAN](#), a collaborative action plan that brings radiologists and referring clinicians together to improve imaging appropriateness.
- Understand and make yourself integral to [bundled-care](#) best practice initiatives.
- Show leadership in [strategic planning](#) related to future imaging needs and service lines. Commit to providing state-of-the-art services and keep your practice on the cutting edge of technology. Inform your administration on technologic advancements to make the case for expansion of services.
- Engage, support, teach, and develop technical staff in providing high-quality imaging and patient care.
- Maintain a [cohesive forward-looking team](#) of radiologists who embrace the department's and organization's vision and direction.
- Create a [departmental governance structure](#) that facilitates innovation, creativity, and best-practice deliverables.
- Incorporate outcome-based measures for quality, cost, and satisfaction in the provider-based contract with the hospital for any funds received that are not from patient care. These goals should align with the overall goals adopted by the hospital.
- Prioritize quality by doing the following:
  - Develop a robust, meaningful, and frequent peer review function within your group and participate in hospital-wide peer review.
  - Undertake [quality projects](#) in your group on a routine basis to enhance the quality of patient care.
  - Get involved in evidence protocols and actively engage with the hospital and physician leadership. Consider using the [Crimson Technology Suite](#) to improve care and eliminate variation.

### **Additional Resources**

[Seeking Out the C-Suite](#) (in the *ACR Bulletin Stakeholder Special Issue*)

[Stanford Quality Improvement RITE \(Radiology Improvement Team Education\) Tutorials](#)

### **Payers**

- Provide input to payers on [alternatives to radiology benefits managers](#).
- Comply with the [MIPPA](#) accreditation mandate.
- Participate in the [Physician Quality Reporting System](#).

## Physician Administration Relations

When leading the physicians in your group, do the following to provide and demonstrate value.

- Employ the highest-quality radiologists. Hire physicians who are clinically trained, ABR- certified, up-to-date on maintenance of certification, and well-versed in peer review and counseling. Consider [diversity](#) in hiring choices.
- Train your group members on how to use clinical decision support tools, electronic health record, the [Dose Index Registry](#)®, [structured reporting](#) templates, and [value reporting resources](#).
- Consider adopting mobile applications, such as [OnePass](#), which aim to make all physicians quickly accessible to each other.
- Stay up to date on quality metrics, the [Physician Quality Reporting System](#), reimbursement issues, etc. Benchmark outcomes and process of care through ACR tools, like the [National Radiology Data Registry](#), [CT Colonography Registry](#), [Dose Index Registry](#), [General Radiology Improvement Database](#), and [National Mammography Database](#), and [Lung Cancer Screening Registry](#).
- Ensure appropriate scheduling, coverage, and utilization of personnel.
- Run a high-quality workplace by creating a pleasant environment, employing ergonomic and up-to-date equipment, and managing time efficiently.
- Manage group governance and dynamics by doing the following:
  - Choose a system of governance for the practice, such as democracy, autocracy, or a hybrid.
  - Foster team building, mutual respect, and comradery among group members.
  - Put in place a [disruptive physician](#) policy.
- Setup systems to recruit, reward, discipline, and terminate physician employees.
- Mentor new group members and junior group members to become group leaders.
- Encourage members to increase their leadership skills in the following ways:
  - Enroll in the [Radiology Leadership Institute](#).
  - Represent the group in the health system venues. Provide such strong leadership that the health system would never want to send out a request for proposal.
  - [Harness data](#) to demonstrate value by means of multiple data scenarios.
  - Oversee the business practice of group with support by joining the [RBMA](#).

### Additional Resources

[Imaging 3.0 Case Study: The Value of Hard Work](#)

# **Business Administration**

Running a radiology practice requires organization, innovation, and agility. This is particularly true now, as radiology transitions from volume to value, faces continual cuts to reimbursement, and takes on new roles in caring for patients.

## **Financial Management**

Financial Management is one of the most important responsibilities of the radiology practice administrator. The value of an administrator could be measured by the increase in profitability of the practice. And strong financial management is critical to achieving a jump in profits each year.

There are two major components of financial management: revenues and expenses. As a general rule, the goal is to maximize revenues while reducing waste and decreasing expenses. While at times it is necessary to spend money to make money, in today's health care market, increasing revenues can be very challenging. Initially, seek to increase revenue through efficient medical billing rather than costly investments.

### **Increasing Revenue**

Focus on the following to boost your bottom line.

- Conduct audits on exam completion, billable charges, coding, compliance, and documentation.
- Evaluate commercial insurance payer contracts. (See the [ACR/RBMA Contract Evaluation Guidelines](#) for tips on what to look for in contracts.)
- Take a look at [hospital contracts](#), especially professional services agreements. Contract language that mandates participation with payers undermines your ability to negotiate reasonable payment terms.
- Submit practice data through the [RBMA's DataMaxx](#) service to receive impartial comparative data on key business metrics.
- Consider increasing the volume of services your group provides. This may mean expanding your territory, increasing marketing in your community, or adding new services.

### **Coding, Billing, and Collections**

The following are best practices to show value to our customers, including payers, while reducing expenses and providing quality care.

#### **Coding (CPT & ICD-9/10)**

Take these steps to optimize your coding process.

- Comply with [PQRS](#) and other [value-based payments](#).
- Lower denials for lack of medical necessity.
- Randomly audit coders on a quarterly basis.
- Require that all coders obtain coding certification in their field of expertise through the [Radiology Coding Certification Board](#).
- If your practice comes across coding mistakes in the system, get in touch with the ACR Carrier Advisory Committee to resolve the problem. Contact the ACR [Economics Department](#) to get in touch with the committee.

#### **Additional Resources**

[CPT coding by interventional radiologists: A multi-institutional evaluation of accuracy and its economic implications](#)

[Have questions about a coding issue? Consider posting on the RBMA Practice Management Forum to get answers from radiology practices facing similar challenges.](#)

## **Billing**

Hit the following benchmarks to get the most out of your billing

- Aim to submit 100 percent clean claims to the payers.
- File 100 percent of claims electronically.
- Reach zero percent timely filing denials.

## **Additional Resources**

[Radiology Billing and ICD-10-CM Coding Radiology Billing Best Practices](#)  
[ACR Billing and Coding Page](#)

## **Collections**

Minimize loss by doing the following.

- Aggressively manage self-pay collections at the time of service.
- Send out patient-friendly statements.
- Carefully monitor the percentage of accounts over 90 days old.
- Diligently manage bad debt.

## **Additional Resources**

[Who's Watching Your Cash Flow](#)

## **Reducing Costs**

Target these areas to keep expenses under control.

- Establish a culture of cost containment.
- Manage costs with persistent attention to detail. No cost is too small to save.
- Look for high-cost items that can be reduced, such as insurance policies (including health care, malpractice, and disability), equipment maintenance agreements, and the number one cost: labor.
- Increase productivity through technology. Look for [efficiencies in tools](#) like [PACS](#), voice recognition, payroll systems, bookkeeping software, marketing resources, scheduling programs, appointment reminders, and inventory systems.
- Consider [lean](#) and time-driven activity-based costing techniques to understand costs and reduce waste and variation.

Other financial management items that need your attention include monthly financial statements, retirement planning, tax management, accounting and banking relationships, credit lines and equipment financing, valuations for buy-ins/buy-outs, joint ventures, pro-formas for new projects, and the ever popular annual budget.

## **Facility Management**

Keep an eye on how your practice's tangible assets affect your costs.

- Simplify appointment scheduling and offer online self-scheduling.
- Immediately schedule appointments for urgent referrals and routine procedures not requiring patient preparation or preauthorization. Enforce a 48-hour wait time for appointments requiring preauthorization or patient preparation.
- Stay current with your facility's accreditation. Consider further designations, like the [ACR's Diagnostic Imaging Center of Excellence](#) and [Breast Imaging Center of Excellence](#).
- Consider [co-management](#) arrangements with the hospital's radiology department.

## **Internet Presence**

In the age of the Internet, your online presence may be your practice's first impression. Ensure that your website is secure and that all publicly available information is HIPAA compliant.

### **Practice Website**

Be sure your site contains the following components:

- Accreditation information
- Physician profiles and credentials
- Facilities
- Service lines
- Scheduling
- Link to [Radiologyinfo.org](http://Radiologyinfo.org)
- Pricing (depending on the business climate in your region)

### **Social Media**

Use [these tools](#) to market your practice and share information with patients.

- [Reach your customers](#) on a variety of platforms, including Facebook and Twitter.
- [Focus on sharing information](#) that builds your brand and offers value to patients and referring physicians.

### **Patient Portal**

Make the following [patient-specific](#) information available online.

- Preparation instructions
- Frequently asked questions
- [Reports](#) and images
- Links to credible sources for further medical information (such as [RadiologyInfo.org](http://RadiologyInfo.org) and [MedlinePlus](http://MedlinePlus))
- Instructions for connecting with a radiologist through email

### **Physician Portal**

Include the following on the referrer portion of your website.

- Reports and images
- Ability to consult with a radiologist
- Links to the [ACR Appropriateness Criteria®](#)

## **Contracting with Professional Employees**

Consider including the following topics in any [employment contract](#), whether the individual is employed by a group or hospital or is acting as a shareholder or owner of a private practice. Some of the topics may not be relevant for all practice types.

- Contract term/termination
- Compensation
- Benefits, including insurance (health, malpractice, disability, etc.)
- Restrictive covenant
- Duties, such as work schedule, vacation, productivity expectations, etc.
- Code of conduct
- General legal clauses

### **Additional Resources**

[Understanding Your Physician Contract](#)

[Contracts in Radiology Practices: Contract Types and Key Provisions](#)

# 10 Keys to Successful Radiology Marketing

Patients and referring physicians have more choice than ever when it comes to imaging. Keep the following in mind as you communicate the value of your practice.

1. The most important purpose of marketing is the [creation of value](#). Identify needs for your services in your target audience and directly market to them.
2. The [brand](#) is the [identity](#) of the radiology group, strategically created and explicitly defined. It is the perception of the radiology group formed by the customer. Brand equity is built by delivering consistently high-quality imaging services and fostering long-term relationships. Identify your [brand message](#) and communicate that clearly across all mediums.
3. The radiology group's key customers are the [referring provider](#), the [patient](#), and the [hospital administrators](#). Communicate your brand to these key groups to establish trust and loyalty.
4. The [marketing plan](#) is a detailed blueprint aligned with the mission, vision, values, and strategic plan of the radiology group. Office visits by the radiology service representative and face-to-face visits with referring doctors form the backbone of marketing efforts. Create an [action plan](#) with specific, measurable, and attainable goals.
5. [Relationship marketing](#) is a component of the overall marketing strategy. After interpersonal encounters, the most important promotional tools are the radiology report, the practice website, and up-to-date educational materials for both providers and patients. Tailor these tools and resources to your target audience.
6. The secret to success is to be visible and to be everywhere. Members of the radiology group must attend and contribute to key events, including administrative meetings, physician conferences (i.e., rad-path and [rounds](#)), and charitable events. Be involved. Be the brand.
7. Create a marketing culture throughout the organization. Designate a radiologist marketing champion to help develop and implement marketing action items.
8. Conduct a [SWOT analysis](#). This [valuable tool](#) identifies a radiology group's strengths, weaknesses, opportunities, and threats. Involve key stakeholders (including customers) annually and use that intelligence to guide marketing efforts.
9. A detailed understanding of the customer's wants, needs, and expectations is a critical component of marketing. Create buyer personas from your customers to guide marketing efforts.
10. New applications such as [lung cancer screening](#) and [breast tomosynthesis](#) are in the introductory phase of the product lifecycle and therefore require assertive marketing efforts to take root and grow. Develop service-specific marketing action plans to achieve utilization and revenue goals.

## **Leadership**

Radiologists must be leaders in their practices and health systems, in their communities, and within organized medicine. Strategic leadership positions radiologists for perpetual success. Practice leadership includes the following: 1) professional responsibilities within a radiologist group and the local hospital; 2) social responsibilities within the local community, as well as at the state and national levels; and 3) political responsibilities at the local, state, and national levels.

Within a department, each radiologist has the ability to affect the culture and success of the group, whether he or she holds a leadership position or not. In the broader health system, radiologists are ideally positioned to become leaders in today's health care environment. Because of our extraordinary contact with physicians in a variety of specialties, radiologists have an underlying advantage that few other specialties have. Familiarity within the health care system positions radiologists to lead the design of optimal patient workflows, create evidence-based medicine protocols, and implement ancillary service offerings. We must also be involved with organized radiology to advocate with policy-makers on behalf of the specialty and to advance the practice and science of radiology.

## **Professional Responsibility**

Focus on the following action items within your practice.

- Be active in professional and scientific societies, such as the [ACR](#), [Radiology Leadership Institute](#)®, [RSNA](#), and [ARRS](#). Participate in subspecialty societies, like the [Society of Interventional Radiology](#) and [American Society of Neuroradiology](#). By staying engaged with our national societies, we ensure the continued vitality of our specialty.
- [Keep quality at the forefront](#). Quality must be the passion of the ideal radiology group leadership team. It should infuse every concept, strategy, and tactic employed by the group to achieve its goals.
- Seek board seats and councilor positions in your [state radiology society](#).
- Get involved in general medical societies to increase radiology's voice in the medical community. Pursue positions in the [AMA](#) and your state medical association.
- Encourage individuals to develop leadership skills in areas like quality improvement, management, and conflict resolution. Participate in leadership training programs, such as those offered by the [Radiology Leadership Institute](#), [RSNA](#), [American College of Physician Executives](#), [American College of Medical Quality](#), and the [Institute for Healthcare Improvement](#). This could include earning a master's of medical management, MBA, or other degree, as well as participating in online education courses such as [RBMA U](#).
- Offer mentoring and shadowing programs for students at various levels, including high school, pre-med, college, medical, nursing, and vocational-tech.
- Join networks of online leaders for discussions, such as [JACR](#)® [tweet chat](#).
- Foster or fund a collaborative research program.
- Support medical related foundations, such as the [RSNA Research and Education Foundation](#), [ACR Foundation](#), [Radiology Leadership Institute](#), [ACRIN](#)®, [Harvey Neiman Health Policy Institute](#).
- Support local academic radiology departments and training programs by giving a noon conference, volunteering time to give faculty an academic day, providing financial support for a faculty position or fellowship slot, sponsoring residents to attend [American Institute for Radiologic Pathology](#) or the [ACR annual meeting](#).

## **Social Responsibility**

Take the following steps to get involved in your community.

- Support local charities, arts venues, religious organizations, schools, non-profits, and hospital or health care foundations. Provide the leadership to ensure the continued vitality of your community.
- Actively uphold the Hippocratic Oath by seeking opportunities to provide professional services to those in need, regardless of compensation.
- Fund scholarships for local students going into health care fields.
- Become active in national and [international global health efforts](#). In addition to contributing to a worthy cause, you will also act as a positive example for radiology.

- Be active in public speaking opportunities through your hospital, community, TV stations, National Public Radio, lecture series, breast cancer awareness month activities, and community health groups, such as breast cancer survivor groups.
- Operate a green practice by choosing sustainable products and practices whenever possible.

## **Political Responsibility**

Get involved with local and national policy-making efforts to protect your patients' access to radiology procedures.

- Assume leadership positions to become part of the decision making process at every level. Join local school boards, political parties, political fundraising groups, and regulatory agencies. Represent radiology in interactions with city, county, state, and national governments.
- Educate policy-makers on radiology issues by lobbying at the state and national levels at [ACR Hill Day](#) or [inviting legislators](#) for a practice visit.