

Letter to the Editor

Voicing Reason

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*Emergency Radiology, Emory University School of Medicine, USA***Dear Editor,**

A real sense of urgency is felt in all radiology departments throughout the nation after the Centers for Medicare and Medicaid Services (CMS) proposed their multiple procedure payment reduction (MPPR) plan which has financially hit the professional aspect of imaging services conducted on a single patient, on the same visit, and in the same settings. The real issue here is not so much the financial cuts, but rather Medicare's deliberate attempt to violate the essence of lawmaking process. Chronically ill patients require multiple radiographic images from different expertise in radiology. However, the imposed MPPR policy shows that CMS lacks real knowledge about the field of radiology and its crucial importance in the early detection, which potentially saves millions of dollars in long-term care. While change and evolution are inevitable, taking advice and input from the stakeholders in restructuring of any service or remuneration must always be a democratic process with involvement and participation of the service providers. Anything short of this is dictatorial and unfortunate. A recent study found that advanced imaging techniques clinically correlate with increasing life expectancy from 0.62 to 0.71 years over a 14-year period [1]. Galloway et al. [2] report that an early identification of traumatic brain injury can help improve outcome.

In their response to MPPR, American College of Radiology (ACR) voiced the proposed rule to be unjust since Medicare funding of imaging services has already taken a steep dive since 2007 with over \$5.5 billion in funding reduction. In a poll conducted by ACR, 70% opposed cuts to imaging services, 80%

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believe that diagnostic imaging is essential, 90% think imaging cuts will have an impact on early detection, 87% of women think a mammogram helps them find a lump before it can be felt, 50% of all radiology exams result in referral.

With further cuts on the horizon, we encourage everyone to voice their opinion to the policy makers against the imaging cuts proposed in 2013 Medicare fee schedule to stop an unnecessary cost cutting measure that potentially jeopardizes patient care.

CONFLICT OF INTEREST

There are no conflicts of interests. There was no commercial funding for the study. The authors have full control over all the data. The paper will not be published elsewhere in any language without the consent of the copyright owners.

Yours sincerely,

Waqas Shuaib and Faisal Khosa

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