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Prior authorization for imaging: a regrettable step by BCBSRI — and one that RIMS has worked for years to avert

The Rhode Island Medical Society is well aware that physicians, employers and patients are receiving notices from Blue Cross & Blue Shield of Rhode Island regarding a new "Radiology Management Program" that the insurer plans to implement January 1, 2008. The program will require prior authorization for outpatient MRI, MRA, CT, PET and nuclear cardiac imaging.

RIMS has opposed this regrettable step by BCBSRI for 6 years and delayed its implementation for all that time, beginning in 2001-2002 with the RIMS Presidency of Dr. Yul Ejnes. RIMS continues to believe that this new requirement does not serve the best interest of patients and represents an untimely additional burden upon primary care practices that are already besieged and vulnerable.

RIMS recognizes that total imaging costs have grown substantially for insurers everywhere and that prior authorization programs seem to represent a rational choice from the perspective of virtually all health insurers in the region and across the nation these days. RIMS nevertheless has continued to urge Blue Cross to collaborate in finding a less onerous approach to assure that these important technologies are used neither more nor less than is appropriate for good patient care.

In particular, RIMS has advocated for and worked to create an all-payer, educational alternative, particularly with a focus on outliers. Now, with implementation imminent, RIMS has urged Blue Cross to permit radiologists to relieve primary practices of the preauthorization burden, and to publish the criteria for authorization, as well as the criteria for exemption from the pre-authorization process. RIMS has not evaluated the educational offerings from MedSolutions, the vendor that BCBSRI selected to implement the program.

RIMS plans to monitor the implementation of preauthorization and will seek the cooperation of its members and of Blue Cross itself in this effort. As part of this process, RIMS encourages medical practices to consider keeping a log of the impact of prior authorization on patients, patient care, office staff and work flow. Documentation of time and other resources expended in compliance with the requirement should be useful in helping RIMS, Blue Cross, the Department of Health, the Health Insurance Commissioner, the Attorney General and consumer groups evaluate the impact of the new program and advocate successfully for appropriate changes.