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**Contributions and comments welcome.**

Send all correspondence to *Link*, 490 Boston Post Road, Suite 200, Sudbury, MA 01776

[link@ahraonline.org](mailto:link@ahraonline.org).

(800) 334-2472 or (978) 443-7591

fax (978) 443-8046.

**[www.ahraonline.org](http://www.ahraonline.org).**

## ABOUT LINK

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## AHRA MISSION STATEMENT

**AHRA: The Association for Medical Imaging Management** is a resource and catalyst for development of professional leadership in imaging sciences.

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# Health Professions Network (HPN) Meets in Washington, DC

By Carlos Vasquez, CRA, FAHRA, MS

The Health Professions Network (HPN) held its spring meeting in the nation's capitol. The objective of the HPN in going to Congress was to advocate for increased funding for and awareness of the allied health professions.

In addition to the day on Capitol Hill, the meeting also featured presentations by Marcia K. Brand, PhD, deputy administrator of the Health Resources and Services Administration (HRSA), and Thomas Elwood, DrPH, executive director of the Association of Schools of Allied Health Professions (ASAHP). As members of HPN's Advocacy Committee, we were responsible for organizing and coordinating the meetings with congressmen and providing attendees with the proper training for a successful interview with their respective representatives.

### HPN Capitol Hill March

There were approximately 30 HPN members in attendance visiting key senators, representatives, and their staff. I visited the office of Congressman Steve Buyer and accompanied other members during visits to congressmen from West Virginia, Kentucky, Arizona, and Utah. In total, HPN attendees visited the offices of 21 senators and 15 representatives.

The HPN agenda for its day on Capitol Hill had three requests:

- Funding for a comprehensive workforce study of the allied health professions to be conducted by the HRSA, which oversees the allied healthcare professions.
- Funding to increase awareness of career opportunities in the allied health professions.
- To consider inserting a statement in the Congressional Record recognizing the contributions and supporting the people who are allied health professionals.

Spending an entire day on Capitol Hill advocating for allied health professions was an invaluable experience – this was a first for me. While I represented AHRA at the meeting, I wore the HPN hat to meet my district representative and deliver the three items we requested. It was interesting to engage my representative and have him agree to help with the HPN agenda.

The allied health professions, including all medical imaging professionals and administrators, are essential to ensuring access to quality care for patients nationwide. Additionally, the allied health field has a great economic impact on the delivery of healthcare, based on sheer numbers, as we represent 60% of health professionals. Allied health fields also offer excellent career opportunities for diverse ethnic minorities and displaced workers. Despite the partisan climate in the Capitol, I believe our message of cost containment, increased access, and improved quality was one that resonated with our federal government lawmakers.

### About the Health Professions Network.

The HPN represents 80 member associations and works to promote collaboration and serve the interests of allied health professionals from 200 different health professions, as well as educators, regulators, accrediting agencies, and government agencies. Since its founding in 1995, HPN has worked to advance and explore current issues relevant to health professions.

The AHRA will continue to be present at these semi-annual meetings, and reports of the progress of the HPN will be published in future issues of Link. For more information on HPN, visit [www.healthpronet.org](http://www.healthpronet.org) or contact me at [Carlos.Vasquez@ssfhs.org](mailto:Carlos.Vasquez@ssfhs.org).

# Puzzle This

By Debra A. Lopez, CRA, FAHRA, 2009-2010 AHRA President

Hope your July Fourth was full of fun, family, and appreciation for our great country!

I spent mine with friends and family in a small town that had its own little parade, firehouse breakfast, family activities—including a rubber ducky race down a river—and some great fireworks over Lake Tahoe (at least I heard they were great, as I spent my time during them holed up in the living room with my very nervous dog, television up full blast, trying to reassure him that things were just fine).

I have created a little crossword puzzle for you (see next page). It is not too difficult, and if you have any questions regarding the answers, all you need to do is look at our current and perhaps some older *Link* newsletters, as well as the AHRA website. Several of the answers can be found in the section of our website specific to the annual meeting! I hope you have already visited that section and have either signed up to attend our meeting in Washington, DC or are planning to! It is being held at a great venue and will enable you to earn a ton of CEUs, see some new products, and talk to vendors in a relaxed setting. Most importantly, however, you will be able to visit with old friends, meet new friends, and build upon your network of colleagues. The Annual Meeting Design Team has put together a wonderful program. I really do hope to see you there!

*To view the answers to the crossword puzzle, visit X and click on "View Answers."*

Now meet this month's featured AHRA staff member, Emily Ryan.

**Emily Ryan**

**AHRA Department:** Membership Coordinator

**Hometown:** Grafton, MA

**Family:** I am the proud mother of a beautiful baby girl, Sophia, who will be turning one in July (where does the time go?). Together we share a laughter-filled home with my fiancé, Jerry, and our little Rat Terrier, Homer. My mother is one of seven children and therefore I have grown up with many cousins. My mom and my younger brother (by one year and six days – almost Irish twins) live in sunny St. Cloud, FL.

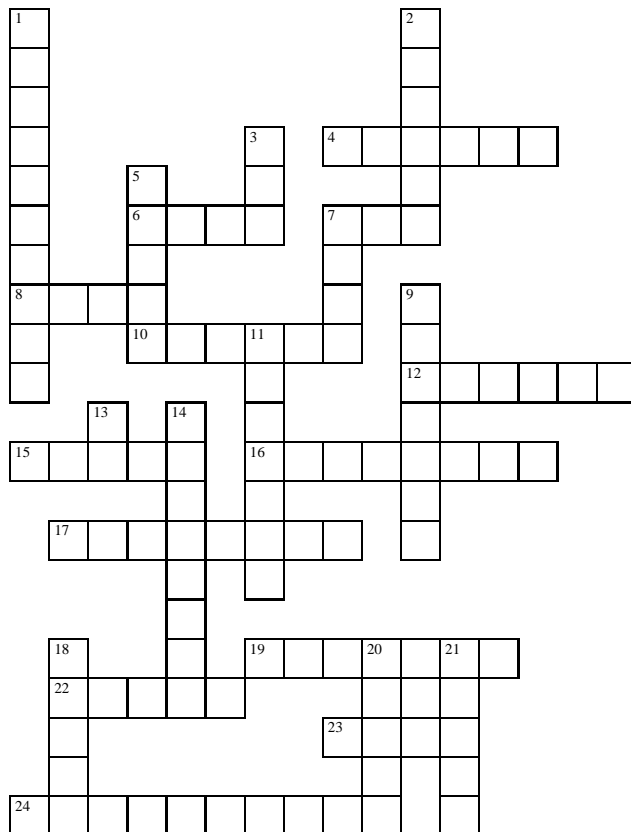
**Interests:** Drawing, writing, reading, cooking, eating, swimming, walking, spending time with my family, teaching my daughter and watching her grow, supporting local agriculture, Boston sports, jazz, shopping, and animals.

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## Puzzle This

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### AHRA TRIVIA



#### ACROSS

- 4 AHRA CEO Ed
- 6 Annual Meeting Platinum sponsor
- 7 New Annual Meeting event: \_\_\_ for Health
- 8 Gold Award winner
- 10 Washington DC airport
- 12 CRA Domain \_\_\_ Management
- 15 AHRA fellow designation
- 16 AHRA 2010 Annual Meeting Chair
- 17 Basic Management Track sponsor
- 19 River alongside Annual Meeting hotel
- 22 LINK editor Doutre
- 23 "Sheila's \_\_\_"
- 24 Education Foundation Chair

#### DOWN

- 1 AHRA professional journal: Radiology \_\_\_
- 2 Royce \_\_\_ scholarship
- 3 AHRA credential
- 5 Sponsor of AHRA Online Institute
- 7 AHRA Website administrator \_\_\_ Ocampo
- 9 Price of electronic copy of an AHRA textbook chapter: \_\_\_ dollars
- 11 2010 Annual Meeting hotel
- 13 Gordon \_\_\_ Tye
- 14 Current RACC Chair John
- 18 AHRA Publications Director Murphy
- 20 AHRA past president
- 21 AHRA textbook to be published this year: \_\_\_ Management in Radiology

Note: For a fee, you can use Crossword Weaver to print a nice copy of this puzzle (one that doesn't look like a web page). You can check it out for free by downloading the demo from [www](http://www.crosswordweaver.com)



# Seeking Nominations for RACC Members

The Radiology Administration Certification Commission (RACC) is accepting nominations for the role of commissioner. The RACC is the governing body of the Certified Radiology Administrator (CRA) program.

There are 2 commissioner seats to be filled on the RACC. Elected commission members will serve a term of 3 years. New commissioners will be determined by tabulated votes from the upcoming election.

Any CRA in good standing is eligible for this position. Only CRAs are eligible to nominate or vote in the upcoming election.

Nominations must include:

- nominee's name
- nominee's telephone number and email
- reason for making the nomination
- name and contact information of the CRA making the nomination

Because nominations can only come from current CRAs, anonymous nominations can not be accepted.

Submit nominations online no later than August 30, 2010 at [http://www.ahraonline.org/AM/Template.cfm?Section=RACC\\_Call\\_for\\_Nominations](http://www.ahraonline.org/AM/Template.cfm?Section=RACC_Call_for_Nominations).



# The RACC: Great Accomplishments!

By Terry Dowd, FAHRA,RT(R)(M)

It has been my privilege in 2010 to be the AHRA Board of Directors liaison to the Radiology Administration Certification Commission (RACC). I have been very impressed by the members of the commission.

The 2010 RACC consists of the following members:

Chair, John Marshall  
Vice Chair, Kimlyn Queen  
Secretary, Luis Marquez  
Director, Phyllis Butterworth (public member)  
Director, Gary Duehring  
Director, Enrico Perez  
Director, Jacqui Rose  
Board Liaison, Terry Dowd

Monthly conference calls are well organized by Chair John Marshall. Team members are well prepared and always focused on promoting the CRA credential and excellence in the imaging management profession.

The RACC and the AHRA are proud of their accomplishments. The RACC mission and vision were recently revised to plan for the future and the commission looks forward to the challenges of the next 10 years. The American Academy of Medical Administrators recently recognized the CRA credential.

The CRA exam was totally re-engineered in 2010. Working with AHRA and CASTLE Worldwide, 12 CRA volunteers developed a completely new exam based on six references that concentrate on the five CRA domains. The exam focuses on both education and experience. There has also been a new fee schedule implemented for those wishing to take the exam.

If you are a CRA and interested in participating in the RACC, or if you would like to nominate a fellow CRA, there are two commission seats to be filled this year. New members will serve a 3 year term commencing January 1, 2011. See the CRA website ([www.CRAinfo.org](http://www.CRAinfo.org)) for more information. It's the perfect opportunity to participate with this dynamic group and shape the future of the CRA!



## Looking for a Good Time?

Not only a good time, but for a great cause. The AHRA Education Foundation will once again host its annual Golf Tournament in conjunction with the AHRA Annual Meeting and Exposition. The event takes place on Sunday, August 22, 2010. This year, the outing will be at the Potomac Ridge Golf Club, one of Southern Maryland's premier golf courses and only a few minutes away from the Gaylord National Hotel and Convention Center.

Additional information about the course may be found at [www.mdgolf.com](http://www.mdgolf.com)

Every year for the last 10 years, the AHRA Education Foundation has hosted this event to raise educational funds for AHRA members. Thanks to the generous support of our vendor partners and AHRA members, this event has raised thousands of dollars that have been used to provide educational opportunities, products, and services designed to promote management education for radiology professionals.

This year's event will once again be played in a "best ball," scramble format, so golfers of all skill levels are encouraged to

participate. The event will feature a continental breakfast and lunch. Prizes will be awarded for the best and not-so-best golfers in the event and we will have an opportunity to recognize and thank our vendors for their generous support.

So if you are looking for a good time, this is your opportunity. Please join us for this year's event. The registration fee includes greens fees, lunch, cart, and transportation to and from the course. Players may enter individually or as part of a team.

Players may register online at:

<http://www.ahraonline.org/AM/Template.cfm?Section=AnnualmagingGolfTournament&Template=/CM/HTMLDisplay.cfm&ContentID=10696>

Sponsorship opportunities are available! <http://www.ahraonline.org/AM/Template.cfm?Section=AnnualMeetingSponsors>

Thank you for your continued support for the AHRA Education Foundation!



## "Get Pinned Too"

The AHRA Education Foundation would like to introduce the 2010 "Get Pinned Too" program. By donating just \$25 to the annual appeal, you will not only be investing in your own profession, but also will receive a commemorative 2010 AHRA donor pin. The Education Foundation hopes to pin at least 600 AHRA members in 2010.

Only donors who have made gifts to the 2010 Annual Appeal

between January 1, 2010 and July 22, 2010 will be recognized on donor signage at the 2010 Annual Meeting. Make your gift today and be recognized by your peers. To donate, visit: <https://www.ahraonline.org/secure/new/Leadership-Institute-Donation.asp>

Get Pinned!

# Write for *Convention Daily* and the Annual Meeting Blog!

AHRA's Annual Meeting and Exposition is approaching fast! *Convention Daily* and the Annual Meeting Blog are looking for volunteers who are interested in writing short articles during the meeting.

Writers are needed to attend breakout sessions and write articles providing fellow attendees with brief synopses. Also, if this is your first annual meeting, we would love to have you chronicle your experience of the meeting before, during, and after the event on the Annual Meeting Blog. Share your 2010 AM experience with your fellow members! AHRA members not attending the meeting will have online

access to *Convention Daily* as it is published, as well as up to the minute updates via the Annual Meeting blog, so even those unable to make it to DC will be able to keep up with the AM goings-on!

If you are interested in contributing to *Convention Daily* and the Annual Meeting Blog or would like further information, please contact associate editor Emily Doutré at [edoutré@ahraonline.org](mailto:edoutré@ahraonline.org).

To check out and subscribe to the Annual Meeting blog, visit: <http://ahra2010.wordpress.com/>

# Rad Toons

AHRA knows that laughter is often the best medicine. That's why we're publishing industry related cartoons in *Link* and letting you write the captions!

## June Winner

Winning caption from June 2010 issue of *Link*:



"You could get some Smucker's from the cafeteria."

Submitted by Dawn McNeil of Springfield, KY.

*New Rad Toons will return in September.*

# AHRA Publications Go Digital

Digital publications provide instant access to information that, in turn, becomes knowledge. Under this premise, AHRA is excited to bring its members some improved and some brand new tools. For example, *Radiology Management* articles (from 1995 to present) have been archived on our website for a while now. However, the database has recently undergone a makeover and has been redesigned to increase usability, notably, with a more granular search functionality.

The July/August 2010 issue of *Radiology Management* will also mark the debut of the journal's digital edition. It is intended to augment the print version by maximizing the use and distribution of content. Some of the benefits of the digital edition include:

- Environmentally friendly. Readers will be given the choice to opt out of the print edition, which will help us reduce materials (paper) and resources (shipping) used in production.
- More timely than print. Digital version will be available approximately 3 weeks ahead of print.
- Ability to search.
- Easy to forward. Email articles to colleagues.
- Embedded links. Hop right over to any referenced website.

- More convenient than print.
- Easy to save/download.
- Other unique features and capabilities.

Also new to our slate of digital publications is the launch of the AHRA Industry News blog ([ahraindustrynews.wordpress.com](http://ahraindustrynews.wordpress.com)). This expanding compilation of news and scholarly research is a natural extension of *Radiology Management* content, which is what makes it different from every other online imaging related news source. It's unique to what leaders in medical imaging management need to know. It's not the latest press releases, but rather, the latest research – timely and timeless information that you can search and reference throughout your career.

Articles on the AHRA Industry News blog are aggregated to provide you with easy access to the literature most closely related to the work you do every day. We filter through myriad professional resources to collect brief abstracts and excerpts, which allow you to quickly decide whether the article is subsequently worth reading in full. Search by core content areas, comment on and rate articles, and even volunteer your time to become a contributor. Be sure to check it out and subscribe to receive email alerts of newly posted content.

# Focusing on the Constant

By Philip L Ruth, MBA, RT(R)

For several years, I have written articles for *Link* that are geared toward the changes within our profession and how those changes impact the patient. I have been in the imaging field for almost 35 years and have never witnessed such uncertain times. Economic woes have hit healthcare as never before. High unemployment combined with employed workers unable to afford healthcare coverage is a major dilemma. These factors, along with populations that are living longer, add to the complexity.

As I talk to colleagues all over the country, I find very few that challenge the fact that the way we provide healthcare needs to change. Americans are demanding change in the way healthcare is provided and we not sure where the political debates will end up. However, one thing is for sure, the needed change is not an overnight fix.

The political debates are both important and concerning. Daily involvement in reimbursement issues, workforce reductions, the lack of capital funds, and strategies to make organizations as lean as possible seem to be never ending. However, we may have a tendency to overlook one major factor: our attention must be focused on the constant—the patient. Reaching out to the patient can be very simple, can create big

gains in satisfaction scores, and be very cost effective. Below are a few simple ideas to help in these challenging times:

- The basics of greeting the patient by name in a positive, friendly manner, along with providing a comforting word can do wonders for the patient's outlook (and our own).
- A clear explanation of the pending procedure, geared toward the appropriate level of learning, will go a long way with patient satisfaction. This interaction not only involves the patient in their own care but demonstrates we are engaged and concerned about the patient.
- The act of doubling a pillow or offering a warm blanket will often help meet the patient's expectations by making them more comfortable.
- Walking a family member or visitor to their destination, whenever possible, shows we value those individuals.
- Daily rounding through departments and waiting areas can bring to light co-worker, family, visitor and physician issues that often can be easily corrected.

Political debates and our daily challenges will continue forever. The bottom line is keeping the patient as our #1 priority by prioritizing their needs and meeting their expectations.

# 2010 Annual Meeting Preview: Tobias Gilk of "2010 MRI Safety Update: Codes and Standards"

As part of the Advanced Management track at the Annual Meeting in August, Tobias Gilk, M. Arch.of Mednovus SAFES-CAN in Overland Park, KS will present "**2010 MRI Safety Update: Codes and Standards.**" (See <http://www.ahraonline.org/AM/Template.cfm?Section=AnnualMeeting> Tuesday for more information.)

The presentation will include a recent retrospective on MRI accidents but will focus primarily on contemporary standards and codes that will help attendees to keep their sites from becoming another MRI accident statistic. The presentation will also discuss on CMS accreditation requirements for MRI and new patient safety criteria, as well as an overview of the recently settled multi-million dollar lawsuit over the MRI death of Michael Colombini, and other relevant legal actions. Perhaps most importantly, an analysis of 2010 updates to the health-care building codes, Guidelines for the Design and Construction of Health Care Facilities, will describe significant new design requirements for MRI facilities.

*Link* recently spoke to presenter Toby Gilk to get a feel for what attendees can expect from the presentation.

**Link:** What inspired you to present on this topic?

**Toby Gilk:** Many people believe that somewhere in the mountain of radiology regulation there simply has to be MRI safety requirements that the industry has used at the point of care. It's absurd that we'd scan 30 million people annually in the US and not have patient safety standards for MRI, right? Yes, it's absurd, but no, there aren't any safety requirements at the point of care for MRI. All of this is on the cusp of changing, however. In 2010, for the first time, The Joint Commission has MRI safety survey requirements, there are new design codes, and there's even talk of new CMS requirements for safety of MRI providers.

**Link:** Why is your topic relevant to our members?

**TG:** Even if someone has seen my prior MR safety presentations, the contemporary changes in design requirements, accreditation demands, and federal oversight mean that the

whole landscape is changing, even from just last year. Yes, there have been the Capitol Hill hearings on ionizing radiation safety and FDA hearings addressing CT and radiation therapy. But with new federal requirements for MRI accreditation—even if it hasn't been getting press—MRI safety is very much on the minds of the federal authorities.

**Link:** How might your presentation impact an attendee's job and/or organization?

**TG:** This will be an incredibly valuable presentation, in part because these coming changes aren't speculative. Standards are already written that states and regulatory agencies are going to adopt. We might not know the precise timeline, but these changes are inevitable. Some are likely to be echoed and expanded upon by federal authorities in the months ahead, but this presentation will be like a glimpse into the crystal ball of MRI safety standards and regulations. This represents a rare opportunity for administrators and managers to prepare for these changes, instead of scurrying to catch up when unannounced changes land on their desk.

**Link:** What 5 words would you use to describe your presentation?

**TG:** Engaging. Informative. Fun. Valuable. Farfegnugen. (OK, that has nothing to do with the presentation, but I needed a fifth word, and a fun one at that.)

**Link:** How can attendees prepare for your session in order to get the most out of it?

**TG:** The presentation will spend some time concentrating on the new physical/environment of care standards for MRI safety. It wouldn't hurt to review where and how people are screened before MRI (both clinically for contraindications, and physically for ferromagnetic materials), your access control protocols, your infection control provisions, the ACR 4-zones, and cryogen safety. But even if you join us without having done this prep, you'll still get a lot of great information to put right to use when you get back home.

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# 2010 Annual Meeting Preview: Tobias Gilk of "2010 MRI Safety Update: Codes and Standards"

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**Link:** What do you think attendees will be most surprised to learn from your presentation?

**TG:** Even if your MRI suite or scanner is brand-spanking new, odds are good that it won't meet the forthcoming standards. This information isn't included in your vendors' siting manuals. It's not yet well known in the architectural or facility planning communities. And these changes may not be on the radar of quality and safety personnel. In short, if radiology administrators don't demand that these issues are prospectively managed by others, you may find yourself having to make changes to MRI suites to keep current with forthcoming changes to

codes and standards.

**Link:** If attendees were to remember one thing about your presentation, what would you most like it to be?

**TG:** I hope that they remember that they had a good time and that something as traditionally dry and painful as MRI safety can be engaging. But really, I'd be thrilled if, instead of remembering my presentation, every attendee returned to their facility committed to making at least one change to improve MR safety for their patients and staff. I'm much less worried about what they remember about the short time we're all together than I am about what they're motivated to do after they get home.

# Members in the News

- Congratulations to AHRA member **Gina Winters**, who was recently promoted to the position of radiology Manager at Ochsner Health System in Jefferson, LA! Gina has served in various roles in Ochsner's Radiology Department for the past 25 years. Specifically, Gina has been a diagnostic radiologic technologist, an interventional technologist, an MRI technologist, the MRI team leader, and the quality resource analyst. Gina's new role includes oversight of outpatient and inpatient diagnostic radiology, radiology at the satellite clinics, interventional radiology, and quality assurance/improvement.

- Congratulations to AHRA past president **Penny Olivi**, whose article entitled "Financial Justification for Imaging Equipment" was recently published in the *Radiology Business Journal*. To read the article, visit: <http://www.imagingbiz.com/articles/view/financial-justification-for-imaging-equipment/>

# Regulatory Review: CMS Issues Proposed Rules Relating to Physician Self-Referral

By Adrienne Dresevic, Esq. and Carey F. Kalmowitz, Esq.

Consistent with our previous predictions regarding the Stark Law's In-Office Ancillary Services Exception (IOASE) (see <http://www.ahraonline.org/link/linkonline/default/index.cfm/member-talk/regulatory-review-physician-selfreferral-updates/> for more information), on June 25, 2010, the Centers for Medicare and Medicaid Services (CMS) released the 2011 Proposed Physician Fee Schedule (the "Proposed Rule"). The Proposed Rule, which includes proposals related to new required disclosures under the IOASE, sets forth certain requirements that must be met in order for a referring physician (eg, a non-radiologist) to refer certain designated health services (DHS), including certain advanced imaging testing services, within his or her practice. While the new proposals do not fundamentally alter a referring physician's ability to rely on the IOASE, it nonetheless does present some procedural obstacles that a referring physician must handle in order to comply with the IOASE.

The Stark Law prohibits a physician from making referrals for DHS (including radiology testing services) payable by Medicare to an entity with which the physician has a financial relationship (unless an exception applies). Referring physicians, however, can lawfully furnish radiology testing services in-office, provided that they comply with the IOASE.

As summarized in the May 2010 Link Regulatory Review (<http://www.ahraonline.org/link/linkonline/default/index.cfm/member-talk/regulatory-review-physician-selfreferral-updates/>), Section 6003 of the Patient Protection and Affordable Care Act (PPACA) recently amended the Stark Law by creating a new disclosure requirement under the IOASE, in regards to referrals for MRI, CT and PET. The Proposed Rule puts CMS's contemplated regulatory framework to govern this new IOASE disclosure requirement into motion. Though this rulemaking currently represents only a proposal, it provides insight into the agency's intentions in handling the disclosure obligation and, thus, can serve as meaningful guidance for industry insiders. A final rule is expected to be published later this year.

Specifically, in addition to MRI, CT, and PET, CMS is considering the expansion of the new disclosure requirement to other radiology and imaging services. Although CMS is currently soliciting comments regarding the composition of such other radiology and imaging services that potentially may be subject to the disclosure requirement, CMS specifically states that, at this

time, it is not inclined to expand the disclosure requirement.

Additionally, CMS has proposed the disclosure notice be written in such a way that it can be reasonably understood by all patients. It proposes to require that the notice explains to the patient that the services may be obtained from a person or entity other than the referring physician or his or her group practice, and should include a list of other suppliers who provide the service. In order for the disclosure requirement to be satisfied, CMS proposes that a record of the patient's signature on the disclosure notification be kept in the patient's medical record.

In addition to written notification, PPACA specifies that the referring physician must also provide the patient with a written list of alternate suppliers at the time of the referral. Under the Proposed Rule, CMS states that it will not require or permit the list to include "providers of services," which includes hospitals and critical access hospitals, among other facilities. Additionally, PPACA requires that the alternative suppliers must provide the relevant services "in the area in which [the patient] resides." In order to mitigate the administrative burden of having multiple lists, CMS is proposing that the listed suppliers be located within a 25 mile radius of the physician's office location at the time of the referral.

In order to assist the patient to make an informed decision regarding the physician referral, CMS proposes that the written list include no fewer than 10 suppliers. CMS recognizes that there may be fewer than 10 other suppliers within the 25 mile radius, and under these circumstances, the physician must list all of the other suppliers that are present within the 25 mile radius, including up to 10 suppliers. If there are no other suppliers of the imaging services in the 25 mile radius, the physician need not provide the list of alternative suppliers, but is still required to disclose to patients that the patients may receive the imaging services from another supplier.

CMS proposes that the physician provide certain information about the listed suppliers, including the name, address, phone number, and distance from the physician's office location at the time of the referral. It is noteworthy that, although PPACA provided that this new disclosure requirement would be effective for referrals on or after January 1, 2010 (and most insiders have

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# Regulatory Review: CMS Issues Proposed Rules Relating to Physician Self-Referral

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taken the position that it would be effective March 23, 2010, the date President Obama signed the bill into law), CMS is now proposing that the new disclosure requirement apply only to services furnished on or after the effective date of the final regulation, which CMS anticipates will be January 1, 2011.

As we have proposed throughout the past year, at the present

time, physician self-referral of advanced imaging services continues to be permitted under the IOASE. Nonetheless, effective January 1, 2011, referring physicians (non-radiologists) that furnish these services in-office will be required to make certain disclosures and provide information to their Medicare patients. Industry stakeholders should remain attentive to the final rule which is expected to be published later this year.

## In Every Issue

### Did You Know?

Did you know that you can now change your www.ahraonline.org login to a username of your choosing? Get easier to remember access to online tools like the member directory, order history, and event registration. Go to your member profile or contact member services for details.

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### Check out AHRA's Emeritus Status and Dues Waiver Program

Are you leaving your job due to retirement or layoffs? Keep your AHRA membership active through our Emeritus and Dues Waiver programs.

#### Emeritus Status

In recognition of the loyalty and contributions of its long-standing members, AHRA established an Emeritus status. In order to be eligible for Emeritus status, an AHRA member must have a total of 15 years of current AHRA membership at the time of the request and no longer be employed in healthcare.

Individuals awarded AHRA Emeritus status may not vote or hold elected office but may continue to provide volunteer service to the organization.

Benefits of AHRA Emeritus status include:

- Waiver of membership dues (Please Note: Annual renewal of Emeritus status is required)
- Access to the AHRA online membership directory
- Subscription to AHRA's monthly e-newsletter, Link
- Subscription to AHRA's online List Server
- Additional 10% discount off member prices for select AHRA products (eg, books, surveys)
- Waiver of conference or seminar registration at one AHRA conference or seminar annually upon request
- Reduced subscription fee (equal to half the regular subscription rate) for *Radiology Management*

To apply for Emeritus status, contact us online [[http://www.ahraonline.org/AM/Template.cfm?Section=Contact\\_AHRA](http://www.ahraonline.org/AM/Template.cfm?Section=Contact_AHRA)] or call 800-334-2472.

#### Dues Waiver Program

The AHRAEF wishes to support members who have become unemployed by offering "AHRA's Education Foundation Transition Package for Radiology Administrators."

AHRA members who have become unemployed can apply for

an extension of their AHRA membership, for up to one year, while the AHRA Education Foundation waives the membership dues. Certain qualifications must be met and an application needs to be submitted. Once accepted, the member will receive the full benefits of AHRA membership.

#### Dues Waiver Qualifications:

- Current AHRA member
- Currently unemployed and actively seeking employment in radiology management
- Not working as a consultant
- Application for dues waiver must be submitted to AHRA.

Once approved, the member will be notified of acceptance. After 6 months, the member will be billed for dues, but may continue the dues waiver by notifying AHRA of unemployed status.

Upon employment, member will notify AHRA immediately. Membership may be continued on a paid basis at that time.

To find out if you qualify for the Dues Waiver program, click here.

[<http://www.ahraonline.org/AM/Template.cfm?Section=DuesWaiverProgram>]

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### July Webinar: Tackling Recruitment and Retention: Picking and Maintaining the Best Team

By **Ernie Stewart RT(R), CRA, MBA, MHSA**

**Presented by: Aimee J. Phillips, MS, RT(R)(M)(CV)(QM)  
Marietta Memorial Hospital, Marietta, GA**

Did you ever consider how much it costs you when you have to replace an employee? Of course, there are the obvious expenses of recruiting, over-time, temporary staffing, and orientation. But what about the other intangible expenses such as decreased productivity, quality, and profitability, not to mention employee morale? How much does this cost your organization? It is no wonder that many companies have employee recruitment and retention as some of their highest priorities.

While not all turnover is bad, unwanted turnover has an extremely negative effect on the bottom line. As managers,

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you have a lot invested in your employees and it is up to you to make sure that you invest wisely and protect your investments in your human assets. It is often said that employees do not leave jobs, they leave managers. With turnover often being traced to management practices, it is critical for managers to recruit high quality employees and implement effective strategies to minimize the loss of your good employees.

Your speaker for this session is Aimee J. Phillips, RT(R)(M)(CV)(QM). In this session, Aimee will help you understand some of the physical, environmental, demographic, and stress-related factors that lead employees to consider leaving the company. You will also learn how to implement some creative recruitment and effective retention strategies.

This webinar will be presented on Thursday, July 22, 2010 from 1-2 PM EST. Click here to register:

[http://www.ahraonline.org/AM/Template.cfm?Section=AHRA\\_Webinars&Template=/CM/HTMLDisplay.cfm&ContentID=10519](http://www.ahraonline.org/AM/Template.cfm?Section=AHRA_Webinars&Template=/CM/HTMLDisplay.cfm&ContentID=10519)

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### New Members

The staff and members of AHRA warmly welcome the following new members!

**Randall Bates**, Franklin, TN  
**Cheryl Ann Beegle**, Westminster, MD  
**Chuck Blevins**, Marietta, OH  
**Lawrence Booker, Jr.**, Gallup, NM  
**Ladine Cruff**, Fargo, ND  
**Peri De Orio**, Washington, DC  
**Andleeb Dombrowski**, Portland, OR  
**David Elkins**, Atlanta, GA  
**Eric Fixsen**, Edison, NJ  
**Vicky Godding**, Enid, OK  
**Amishha Gujral**, Philadelphia, PA  
**Robert Hardin**, Gainesville, FL  
**Edwin Herrod**, Atlanta, GA  
**Tim Karagounis**, Lodi, CA  
**Kiff Mendoza**, Tallahassee, FL  
**Patti Miles**, Portland, OR  
**Nicole Miller**, Saint Paul, MN  
**Karen Milton**, Baxley, GA  
**Tonya Pick**, Port Matilda, PA  
**Carolyn Purvis**, Milton, KY  
**Kimberly Pyles**, Lakeland, FL  
**William Ritchie**, Louisville, KY  
**Jonna Roopas**, Canton, GA

**Gail Schwartz**, York, PA  
**Tori Spencer**, Fargo, ND  
**Sheryl Streich**, Alexandria, MN  
**Marcella Volkmar**, Lady Lake, FL  
**Beverly Woldow**, Galloway, NJ  
**Jacqueline Wright**, Washington, DC  
**David Canal**, Monroe, LA  
**Leonard Cardinale**, Goshen, NY  
**Cheri Friedl**, Cape Coral, FL  
**Crystal Hilton**, Yarmouth, NS Canada  
**Alejandro Ortiz**, San Juan, PR  
**Jeff Tintzman**, Whitefish, MT

Do you know someone who can benefit from an AHRA membership? Let us know! Send the contact information to our membership department at [memberservices@ahraonline.org](mailto:memberservices@ahraonline.org). If your referral joins, you'll be listed here as well!

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### Online Institute Feature

#### Professional Development Series:

#### **Communication & Information Resources in Radiology Chapter 13: Information Technology: A Value-Driven Approach**

The dependency on IT in radiology has increased dramatically with the advent of improved image processing and computer-aided diagnosis, as well as the demand for greater specificity in the documentation of quality and outcomes. However, the use of these technologies is far from universal, and the techniques are implemented with varying results. The cost of these systems has slowed their adoption, but the lack of perceived or real value received from implementations has also contributed. This chapter offers approaches to improving the success of radiology IT projects. It describes how to plan for radiology IT and then select and implement it to provide the maximum benefit to the facility and the maximum impact on the quality of services delivered to customers.

To view this and other archived webinars, Quick Credit articles, Professional Development Series textbook chapters, and conference sessions, and to take the associated CE exams, visit: <http://www.ahraonline.org/AM/Template.cfm?Section=aw090731info>

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### From the List Server

The AHRA List Server is an online tool that allows you to network with other imaging professionals, in one common place. Many AHRA members take advantage of this exclusive member benefit and use the List Server daily to share valuable information with their peers.

Below is a recent discussion:

**"How does your registration department keep orders for patients registering for radiology procedures? We have lots of orders in cabinets for patients getting procedures. I am exploring options of electronic filing of orders. Any comments or suggestions are appreciated. Thank you."**

**-- Lori Smith, BSRT(R), RDMS, RDCS, RVT**

Responses:

-- Admitting scans them into Meditech.

-- Our orders are scanned into our HIS/RIS system when scheduled. That way Imaging or PFS can view them as needed.

-- We began using DCR Tracker which has now been upgraded to Trace Pixcert, It is an electronic face server. This has been a god sent for our Department. All orders for all procedures are in the server and be accessed by whomever you allow. I will be happy to get you some contact information or answer any question s you have.

-- Very few physicians have EMR so at the moment, the order is filed in central scheduling until procedure date. The pt is "preregistered" the day before procedure by registration and at this time the order is scanned into pts visit account. It's scanned into a hospital wide system, Horizen Patient Folder.

-- This is basically our process as well. The orders are in a paper file until the patient is preregistered and then the order is scanned in to Meditech. The paper copy is sent down to us with the preregistration package so that the techs and radiologists can read the order as well.

-- Our admitting department scans the orders into HPF - electronic file system.

For more information about AHRA's List Server, click here. [<http://www.ahraonline.org/AM/Template.cfm?Section=ListServer&Template=/CM/HTMLDisplay.cfm&ContentID=7399>]

# AHRA Announces Annual Meeting Registration Discounts for Organizations

Are you thinking of sending multiple employees from your organization to the AHRA Annual Meeting and Exposition this year? AHRA will reward you for doing so!

AHRA recognizes this meeting is a great opportunity for team-building, where employees can learn techniques to improve services, workflow, and processes for your organization. With over 80 sessions of relevant information, having an extra person at the annual meeting can be helpful. To help make this happen, we have arranged a special offer that allows additional colleagues from the same organization to register for the full meeting at reduced fees:

- First employee registration, full price
- Second employee, \$100 off registration

- All other employees, \$150 off registration

As if this weren't enough, all that register by July 31 will be entered into a drawing to win AHRA Membership Dues for Life!

To take advantage of this remarkable deal, please visit the following site to download the registration form and mail or fax it back to us: [http://www.ahraonline.org/AM/Downloads/2010AM/AHRA2010\\_OrgRegForm.pdf](http://www.ahraonline.org/AM/Downloads/2010AM/AHRA2010_OrgRegForm.pdf). If you have any questions regarding this offer, please call AHRA Member Services at (978) 443-7591. Please note that AHRA will not reimburse the discount to those that have already registered for the meeting.

## New Jersey/New York Regional Meeting Roundup

On Thursday, June 10, 2010, Holy Name Medical Center (HNMC) in Teaneck, NJ sponsored their first AHRA New Jersey/New York Regional Meeting. Sixty AHRA members, non members, and vendors from the surrounding areas attended this event.

To read more details from this event, please visit: [http://www.ahraonline.org/AM/Template.cfm?Section=New\\_Jersey\\_New\\_York\\_Regional\\_Meeting](http://www.ahraonline.org/AM/Template.cfm?Section=New_Jersey_New_York_Regional_Meeting)

Kudos goes to the team at HNMC, the host and sponsor of the

event. To say they went all out for this event is an understatement. The room set up, hors d'oeuvres, dinner, and desserts were top notch! Everyone in attendance was pleased; we have received many positive comments about the meeting, food, and presentation. The meeting was a great success! Everyone is looking forward to the next area meeting scheduled for this fall on the New York side of the Hudson River!

To view photos from this event, please visit our Facebook page: <http://www.facebook.com/pages/AHRA/97297237733>

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## Gulf Coast Regional Meeting Roundup

The AHRA Gulf Coast Regional Meeting took place June 4, 2010 at the Brent House Conference Center/Ochsner Medical Center in New Orleans, LA. Fifty leaders from Louisiana, Mississippi, and Alabama experienced a great day of education and networking.

All speakers were awesome and provided great information for all to use and bring back to their facility.

To read more details from this event, visit: [http://www.ahraonline.org/AM/Template.cfm?Section=Gulf\\_Coast\\_Regional\\_Mee](http://www.ahraonline.org/AM/Template.cfm?Section=Gulf_Coast_Regional_Mee)

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Special thanks to Jeff Sirk of Majestic Medical Solutions, Inc. for sponsoring the first annual AHRA Gulf Coast Regional Meeting. This meeting was a HUGE success! From New Orleans, WHO DAT!

To view more photos from this event, please visit our Facebook page: <http://www.facebook.com/pages/AHRA/97297237733>