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How to get outpatient cardiac CT off the ground

By *Steven R. Renard*

Only yesterday, PET was the talk of the town, and outpatient centers were clamoring to get their hands on it. I remember that day vividly and can recall the resources needed to get an outpatient PET center off the ground.

The marketing, sales, and education of the community and physicians were costly and time-consuming. To ease the financial strain and decrease the barrier of entry, vendors developed marketing and education programs as part of their package. Some sold these as an option, ranging from \$15,000 to \$50,000, while others included them in their base packages.

Either way, these programs proved critically important in helping imaging centers develop PET, while preserving cash-flow. Other helpful offers came in the form of longer ramp-up payments on the equipment and onsite training to referring physicians who could earn continuing education credits.

Now outpatient centers face similar challenges with cardiac CT. Even as centers wait for Medicare to officially reimburse for cardiovascular CT angiography, CTA is moving ahead with some six million procedures performed in 2005, according to Siemens Medical Solutions. Procedure volumes are expected to reach about eight million in 2006.

With this new technology come the same problems many centers encountered with PET.

A marketing, sales, and education program for cardiac CT will cost about \$50,000 to \$75,000. Those costs include fees associated with basic community and referral education.

Educational efforts. Monthly or bimonthly education for referring physicians is a must for any CVCTA program. Physicians need to be educated not only on the usefulness of this application but about patient demand, indications, and reimbursement. Overprescribing precautions for this modality need to be constantly reinforced. It would be disastrous for the reputation of CVCTA, and irresponsible for an outpatient center, not to educate referring physicians about proper utilization.

For example, as early adopters in CVCTA, Liberty Pacific Medical Imaging (of which Renard is president and COO) has seen referring physicians order workups for 30- and 40-year-old patients without a qualifying history. When the patient has a referral in hand, it becomes much harder to address the actual need of a scan with the patient, as

well as with the referral source.

Reaching out to educate the referring community can cost tens of thousands of dollars and use a lot of our time. This time often comes at the sacrifice of marketing other modalities. Currently, most centers cover the cost of the education process, and the marketing/sales representatives are made solely responsible for this daunting task. It would be helpful if the vendors took a more active role in this area.

Informatics assistance. The cost associated with storage and delivery of CVCTA images is only going to mount over time. Onsite IT costs, additional bandwidth, and image storage costs are backbreakers, because most outpatient centers can't share these costs with other departments. Whether it is local IT support or offsite storage solutions, these value-added options could prove very helpful to outpatient imaging centers.

Sales and marketing. Direct sales and marketing to the community via the Web, television, radio, and direct mail is expensive. Patients also require education through media. They should know whether they can ask their physicians if a CVCTA is the right choice for them. They need to be aware of the benefits and risks associated with the study. Liberty Pacific turns away walk-ins who have not previously consulted with their physicians to determine if they are a good candidate and are not informed of risks such as radiation exposure.

The outpatient imaging marketplace has always been a tough business environment. In light of the looming DRA and the pattern of continuously declining reimbursement, outpatient centers need help from vendors. A value-added package to educate and market cardiac CT to physicians would prove helpful to centers. Existing stock marketing packages in which images are cut and pasted into pamphlets are only so useful in delivering the CVCTA's message in a clear, effective, and responsible manner.

The growing installed base of CVCTA scanners coupled with cooperative efforts between vendors and imaging centers to educate CVCTA effectively will yield a product that can be marketed as easily as ultrasound and withstand the test of time.

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