



PHOTO BY DAN DONEHEY

Lori Bellethton, a support services supervisor, shows a patient how to use the electronic check-in system at the Imaging Center for Women.

With High-Deductible Health Plans on the Rise, RAF Partners Take Steps to Ease Burden

Nearly 80% of U.S. employees have a health plan requiring they pay at least \$1,200 of medical expenses annually before insurance contributes its share. An astounding 40% have high-deductible health plans with larger obligations, noted Ed Swager, CEO of Radiologic Associates of Fredericksburg (RAF).

In response to the rising costs of deductibles, RAF and the outpatient centers it partners with, have been using an electronic check-in system and no-interest payment plans to make health expenses more understandable and affordable for patients at Medical Imaging of Fredericksburg, the Imaging Center for Women, Medical Imaging at Lee's Hill, Medical Imaging of North Stafford, and Virginia Interventional & Vascular Associates (VIVA).

"Our check-in system helps clarify for patients what their financial obligation is based on their insurance, and our payment plans enable patients to pay these high out-of-pocket expenses over time, without interest, and still have their procedures now when they need them," Swager explained.

Recently, Swager spoke with *Imaging Advances* about the reasons why high-deductible health plans have become so prevalent, what their impact is on patients and healthcare providers, and how RAF and its partners are working with patients to manage health expenses.

High-Deductible Health Plans on the Rise continued page 3

Yearly Mammograms for Women 40+ Reduce Cancer Deaths

Most women have heard about the life-saving benefits of yearly mammograms for women ages 40 and older. Multiple research studies have shown that mammograms reduce breast cancer deaths by detecting cancers at earlier, more treatable, stages, noted Roni Talukdar, MD, a breast imaging specialist with Radiologic Associates of Fredericksburg who is the director of the Imaging Center for Women.

Trusted medical groups recommend yearly mammograms, and Medicare and most private insurers cover them.

Yet researchers report that the percentage of U.S. women scheduling yearly mammograms declined in the years following 2009, when the U.S. Preventive Services Task Force released new and controversial mammogram guidelines.

Dr. Talukdar is particularly troubled by comments from a few doctors covered by the national press who contend mammograms can be scheduled less frequently or perhaps not at all thanks to advances in breast cancer treatment. These doctors are not breast imaging specialists or cancer specialists, and do not have the expertise to comment on breast cancer subjects, he explained.

Yearly Mammograms continued page 2



PHOTO BY DAN DONEHEY

Candice Smith, a registered mammographer with the Imaging Center for Women, prepares for a mammogram.

Yearly Mammograms continued from page 1

“Studies show women 40 and older should get mammograms every year,” Dr. Talukdar said. “Mammography is not the most comfortable procedure so comments like this just give patients an out to delay or avoid screening. No physicians who actually deal with breast cancer are against yearly screening mammograms.”

Troubling National Trends

Between 2009 and 2012 the percentage of U.S. women between the ages of 50 and 64 receiving yearly mammograms declined an estimated 6.1% overall, according to a Harvard Medical School study published online Feb. 9 in the *Journal of Clinical Oncology*. The decline was even more dramatic for women in their 40s, an estimated 9.9%. The study also noted a drop in the percentage of women receiving mammograms every two years.

The study suggested that controversial recommendations by the U.S. Preventive Services Task Force were to blame. In 2009 the task force recommended that women at normal risk of breast cancer begin mammograms at age 50, not 40, and have mammograms every two years versus every year through age 74. Dr. Talukdar believes press comments in recent years by doctors who are unqualified to advise on breast cancer subjects have added to the confusion.

Locally, primary care physicians and OB-GYNs are doing a good job advising women on the need for yearly mammograms, Dr. Talukdar said, but some patients at the Imaging Center

for Women – including a few who have come in with palpable lumps – have commented that they thought medical guidelines called for screenings every two years.

Research Supports Mammograms

In general, research shows that the earlier breast cancer is detected and treated, the better the chances of survival. After regular mammogram screening for women began in the mid 1980s, breast cancer death rates dropped significantly, Dr. Talukdar noted. U.S. government statistics indicate that breast cancer deaths for women decreased 34% between 1990 and 2011. Yes, breast cancer treatment advances have increased survival rates but regular mammograms have played an important role, he added.

One question some patients have about mammograms concerns radiation exposure. Dr. Talukdar reassures patients that radiation exposure during a mammogram is very low – about one-half the radiation exposure during a flight from the East Coast to Los Angeles and back.

Above all, Dr. Talukdar wants women to know that mammograms are still

the single best way to screen for breast cancer.

“Women at normal risk should start getting yearly mammograms at age 40. Those with clinical symptoms or a close relative who had cancer before age 40 should start sooner. Talk with your internal medicine or OB-GYN physician to discuss the timing that is right for you,” Dr. Talukdar advised.

Dr. Talukdar, a Board Certified Radiologist with Fellowship Training from Memorial Sloan-Kettering Cancer Center, is one of 10 physicians with Radiologic Associates of Fredericksburg (RAF) who regularly interpret mammograms and care for patients at the Imaging Center for Women in Fredericksburg, a partnership of RAF and Mary Washington Healthcare. ■

**NEW!
3D MAMMOGRAPHY.
HIGHER ACCURACY.
GREATER PEACE
OF MIND.**

**EARLY DETECTION
JUST GOT EARLIER.**

- 3D mammograms find 35% of cancers sooner.
- More accurate results.
- 3D mammography is covered by Medicare, but if your insurance doesn't cover it, ask about convenient payment options.
- To learn more about our fellowship-trained radiologists, please go to rafimaging.com.
- For details on our 3D mammography capabilities, visit mif3d.com.

Call 540-741-XRAY (9729) to schedule an appointment.



Only at
**Imaging Center
for Women**

In partnership with
Radiologic Associates of Fredericksburg

1300 Hospital Dr., Suite 100, Fredericksburg, VA 22401 • www.mif3d.com



**Dr. Roni Talukdar and Dr. Catherine Buhler
review mammogram results.**

PHOTO BY DAN DONEHEY

Cost Concerns

Until the 1990s and early 2000s, most employer-sponsored insurance plans paid 80% of an employee's medical costs, the employee paid 20%, and out-of-pocket expenses were relatively manageable for American workers, Swager explained. The concept of high-deductible health plans sprang from the idea that costs could be lowered if consumers had greater responsibility for their overall expenses. For example, a patient under the 80/20 plan who was likely to visit a doctor at the first sign of possible flu would be more inclined to wait to see if it were a simple cold if a high deductible had to be met.

Today the federal government spends \$3.8 trillion on healthcare annually and the pressure to contain costs continues to grow, he noted.

High Deductibles Impact

The major concern with high-deductible health plans is that some patients are delaying important medical services. In fact, a Reuters survey estimates that 24% of people have cancelled or postponed healthcare because of costs, Swager said. He added that many high-deductible health plans offer reasonably priced preventive care and lower monthly premiums but require patients to meet deductibles as high as \$2,000 to \$10,000 before their insurance kicks in, which helps patients in catastrophic medical situations but not most others.

"Patients delaying healthcare because of costs is a real problem because early diagnosis is critical to the treatment of heart disease, cancer and many other serious conditions," Swager explained.

RAF Partners Respond

Swager noted that VIVA, RAF's interventional radiology and vascular surgery division, and Mary Washington Healthcare (MWHC) implemented a program to address the high-deductible challenge. Together, RAF and MWHC deliver services to four medical imaging centers in Fredericksburg, Spotsylvania and Stafford.

"We recognize the burden on patients with high deductibles," Swager said. "What we have done is to use technology and a payment process to help our patients."

The technology is Phreesia, an electronic check-in system that collects relevant clinical and demographic information from patients. Phreesia automatically communicates with a patient's insurance company to determine benefits, co-pays and deductibles. "Through Phreesia, we can tell patients their current deductible and balance. We use this to let patients and our staff members know what insurance requires and the portion expected at the time of a visit," Swager said.

Patients also can pay part of their deductible now and the rest later through established payment plans. Swager can relate to the need for payment plans because of his sticker shock over the \$6,000 deductible required for his wife's recent back surgery. "That is a frightening amount when you consider that the average family is making \$57,000," Swager said.

"We know our services and healthcare in general are costly. Patients can pay a portion at the time of their service and we also offer payment plans. So when you come in for an MRI, PET or other procedure, you can pay over time with no interest," Swager explained. He also noted that MIF and VIVA's outpatient facilities help conserve healthcare spending by offering lower-cost settings for medical procedures compared with inpatient hospital stays.

"With these processes in place, our facilities are achieving patient satisfaction ratings in the top 95–99 percentile compared with other providers," Swager said. "We are trying to ease the burden we all face with healthcare, through technology and payments over time." ■

Radiologist Spotlight:

George T. Sofis, MD

When Dr. George Sofis, a board-certified diagnostic radiologist at Radiologic Associates of Fredericksburg, started college at Duke University, he wanted to be an environmental engineer. But his career direction took a sharp



turn. "My best friends were going into medicine," he said. "Their arguments were convincing ones. 'You'll help people. You'll always be in demand. You'll have job security.' All of that sounded like a good idea!"

Although switching over to a medical career, and a career in radiology, at that, meant changing his mental model ("I love being outside, in nature – and radiologists are often in a dark room, in a virtual world"), he pursued his chosen vocation with passion. In 2000, he graduated from the Medical University of South Carolina, in the state he considers home. He completed his internship and radiology residency at Baylor College of Medicine in Houston, TX; finished his fellowship in musculoskeletal radiology at Duke University in Durham, NC; and joined RAF in 2006.

Along with working at the Imaging Center for Women, a partnership of RAF and Mary Washington Healthcare, Dr. Sofis has a special niche in sports medicine, serving as the head of RAF's musculoskeletal section and as one of the "go-to guys" for sports-related injuries.

He also enjoys having a say in the management and strategic visions of his group. In his daily work, he is reminded often of what a physician mentor told him during his residency in Texas: "Don't forget that whatever is the best decision for the patient is the best decision for your business."

What Dr. Sofis appreciates most about his work at RAF is simply stated: "I like that we can take care of our community. Our goal is not just to diagnose, but to add value to the patient experience. For example, we're available 24/7 for physician consultation and engage patients directly in their healthcare decisions, particularly at the Imaging Center for Women."

Over his years with RAF, Dr. Sofis' concept of community has expanded to global dimensions. As part of various missions, he has journeyed to far corners of the world – from Peru to South Africa – to provide consult to global colleagues and free medical care to those in need.

Dr. Sofis met his wife, Charmaine, while on a medical school rotation in London in 2000. A native of South Africa, she was then working as a teacher. The two went on to marry and have four children: Annamarita, 12; Thomas, 10; Emma, 8; and Luke, 4. Other members of the Sofis family include a dog, a hamster, a rabbit, various lizards, five fish, and five chickens.

Along with reading and "sowing and reaping" in the family's vegetable garden, Dr. Sofis' recreational activities revolve around nature – boating, hiking in the Shenandoah Mountains, and canoeing on the Rappahannock River. ■

www.rafimaging.com
www.vivassociates.com
 (540) 361-1000

Ed Swager, Chief Executive Officer

Radiologic Associates of Fredericksburg (RAF) is the largest provider of medical imaging services in the Fredericksburg, Stafford and Spotsylvania area. RAF's interventional radiology and vascular services group, Virginia Interventional & Vascular Associates (VIVA), performs minimally invasive procedures, vascular lab studies and vascular surgery.

RAF publishes *Imaging Advances* periodically for referring physicians and the greater medical community. For more information, please contact Irene Valentino, RAF Director of Administrative Operations, ivalentino@rafadmin.com, (540) 361-1000.

Radiologic Associates of Fredericksburg
 10401 Spotsylvania Avenue, Suite 200
 Fredericksburg, VA 22408



Imaging Advances is an award-winning publication produced by Health Industry Writers, a division of Susan Carol Associates Public Relations



In Memoriam

This summer, Radiologic Associates of Fredericksburg (RAF) lost two legacy physicians who contributed tremendously to the development of local radiology services and the healthcare of area residents. Donald Miller Allen, M.D., passed away June 17, 2015, at the age of 70. Donald John Kenneweg, M.D., died Aug. 16, 2015, at the age of 82.

“Don Allen and Don Kenneweg were both exceptional physicians who were cherished colleagues, friends, and mentors to those of us at RAF. Each made a lasting impact on medical care in our region,” said Michael J. Hewitt, M.D., a RAF radiologist since 1982. “No radiologist in our memory ever accomplished more leadership roles at once than Dr. Allen. No radiologist in our memory ever devoted so much thought and energy toward building an outstanding department of radiology than Dr. Kenneweg did during his years of chairmanship.”



Dr. Allen

Dr. Allen was a physician with RAF for 37 years before his retirement in 2012. Board-certified in diagnostic radiology with a focus on women's imaging, Dr. Allen co-founded the Imaging Center for Women (ICW) in 1996. He served as physician director of ICW until 2009 and was instrumental in envisioning and developing the new ICW that opened in 2010 on the campus of Mary Washington Hospital. Dr. Allen also was medical director during the development of three other outpatient imaging centers: Medical Imaging of Fredericksburg, Medical Imaging at Lee's Hill, and Medical Imaging of North Stafford. He was past president of the medical staff of Mary Washington Hospital, the local

medical society, and the Virginia Chapter of the American College of Radiology. He was also a councilor and fellow in the American College of Radiology and a member of the Eastern Radiological Society.

Interviewed before his retirement, Dr. Allen said, “My work means the world to me. So often, the patients we see have significant concerns about cancer. With mammograms and other screenings, we are finding cancers at a much earlier stage—and helping patients take the next steps toward life-saving treatment and recovery.”



Dr. Kenneweg

Dr. Kenneweg settled in Fredericksburg in 1966, beginning his career as a RAF radiologist at Mary Washington Hospital with a special interest in nuclear medicine. Board certified, he worked at the hospital for 32 years, eight of those as chairman of the Department of Radiology. He was a member of the medical staff of Mary Washington Hospital and the Fredericksburg Area Medical Society, serving both organizations as medical staff president in 1979. Dr. Kenneweg was also the founder and first medical director of the Mary Washington School of Radiologic Technology and was chairman of the Mary Washington Hospital Credentials Committee for many years. As a member of the Virginia Chapter, American College of Radiology, Dr. Kenneweg served in every office capacity, including president in 1983–1984, as a councilor to the American College of Radiology (ACR), and as a councilor to the Radiologic Society of North America. He was also a fellow in the ACR.

Dr. Kenneweg's and Dr. Allen's additional contributions toward improving medical care and the communities in which they lived are numerous. Both physicians played a key role in welcoming new RAF associates into the Fredericksburg medical community and mentoring them to ensure excellently trained generations of new radiologists serving our region. RAF is honored to have known them and their loving families. ■