Strategic Radiology: The Beginning of the End?

By Timothy V. Myers, MD [2]

The formation and alternative approach of national radiology group Advanced Diagnostic Imaging has three potential outcomes for Strategic Radiology.

“As four score and seven years ago our fathers brought forth on this continent, a new nation, conceived in Liberty, and dedicated to the proposition that all men are created equal. Now we are engaged in a great civil war, testing whether that nation, or any nation so conceived, and so dedicated, can long endure.” — Abraham Lincoln, Gettysburg Address

As we close in on the 150th anniversary of these words, it occurred to me there is a parallel playing out before us in radiology. Certainly it does not have the force and depth of meaning as the civil war, but the forces at work within and around radiology will shape how we practice for years to come. The words from Lincoln came to me while reading about the partnership of Optimal Radiology with Advanced Diagnostic Imaging (ADI) to form Optimal Radiology Partners (ORP). According to press releases, this partnership will form “the nation's first integrated national radiology practice.”

But wait, isn’t ADI already part of at least the beginning of a “collaborative model in which data and best practices are shared, clinical practice information is interchanged, and certain practice expenses are consolidated. [Whose] goal is higher quality and more cost-efficient delivery of medical imaging.” In other words: Strategic Radiology (SR)?

The concept of SR began as a vision of a consortium of large, strategically placed large groups who would, in time, form a national radiology group. The question was, and continues to be, can a group so conceived long endure — at least if run by and for radiologists?

With the formation of ORP, does this signal the end, or at least the beginning of the end of SR? Certainly there have been significant issues and roadblocks as SR has tried to live up to its potential. Not the least of which is the difficulty of herding such a large number of feral cats, a.k.a. radiologists, in any specific direction.

Each group comes with its own list of problems and difficulties as well as a wish of what the vision, mission and future of SR could and should be. On one side these issues include pressure from hospitals and systems to become employees, loss of income and the difficulty of moving from large, but basically mom-and-pop radiology groups to corporate radiology companies. On the other side, there is pressure from the more advanced radiology groups to move more rapidly and seize the momentum created by the formation of SR and benefit from their “first-to-market” position.

This latest move — by one of the largest, most advanced and entrepreneurial groups, ADI — to seek an alternative path to formation of a national radiology company, has three potential outcomes. First, SR could throw in the towel and come to the conclusion that while the idea of a national radiology group is the right move, SR is not the correct vehicle to get there. Second, other aggressive groups could move in their own direction to both position themselves for more aggressive growth and counter ADI’s bold move, also leading to the demise of SR. Or third, SR could find its way out of the doldrums and begin its own move to aggressively lead the remaining aligned groups to realize its potential.

I don’t know which of these will happen. I happen to share the original view of the best way forward: private practice radiology groups aligning to form a strong, organized, entrepreneurial collective that can support its own as well as each individual group’s strategy for growth and expansion. I believe that only this type of association of radiologists will have the long-term best interests of radiology and the radiologists at heart. But, Lincoln’s question remains: Can “any (group of radiologists) so conceived, and so dedicated, long endure?”

Disclosures:

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