COVID-19 has accelerated the already rising demand and clinical need for timely medical imaging services as the increased complexity of radiologic studies have created high demand for radiology services. The radiologist assistant (RA) is an advanced-level radiographer who performs imaging and non-imaging procedures under the direct supervision of a radiologist and is one such solution.

Increasing and ensuring access to radiology services, in particular procedures that only a radiologist may currently perform and in areas that are already seeing or likely to see large influxes of patients due to COVID-19 is essential. In many cases, a radiologist assistant (RA) has the appropriate education and is clinically competent to perform these procedures under the supervision of a radiologist, but Medicare does not recognize the RA for these procedures.

These RAs are qualified and permitted by state licensure laws to perform these services in hospital inpatient and outpatient settings where they work. RAs must complete a rigorous academic program encompassing a nationally recognized curriculum, a radiologist-directed clinical preceptorship, and a mandatory nationally recognized certification examination. RAs always practice under the supervision of a radiologist.

While RAs are newly recognized under Medicare to perform imaging services under direct supervision, the radiology practices who employ them are unable to submit claims to Medicare for most non-imaging services performed by an RA in hospitals and office settings where they normally work due to outdated and overly restrictive rules.

The Medicare Access to Radiology Care Act (MARCA) H.R. 3657/S.2641, introduced in the House by Reps. Mike Doyle (D-PA) and John Curtis (R-UT) and in the Senate by Senators John Boozman (R-AR), Bob Casey (D-PA), Steve Daines (R-MT), allows RAs to be fully utilized in radiology practices to provide high quality, efficient, and cost-effective care to patients.

If the RA was recognized to furnish services, incident to a radiologist services, in all practice settings and allowed to practice their full scope of practice under the supervision levels established by state statute and/or regulation, access to radiology services could improve in the rural and urban underserved areas.

It’s critical that we recognize this group of medical providers under Medicare reimbursement in order to ensure timely access to quality medical care for all those in need during this unprecedented pandemic.