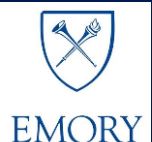




Reductions in Reimbursement and RVUs for Interventional Radiology Procedures: Trends from 2011 to 2021 Compared to Other Physician Specialties



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Purpose: To compare trends in reimbursement and RVUs for IR procedures to those performed by other physician specialties from 2011-2021.

Methods: Facility reimbursement and RVU values were obtained from the CMS Physician Fee Schedule tool for the years 2011 to 2021. Twenty-eight common IR procedures were compared to different surgical and minimally invasive procedures performed by other specialties for the same or similar indications.

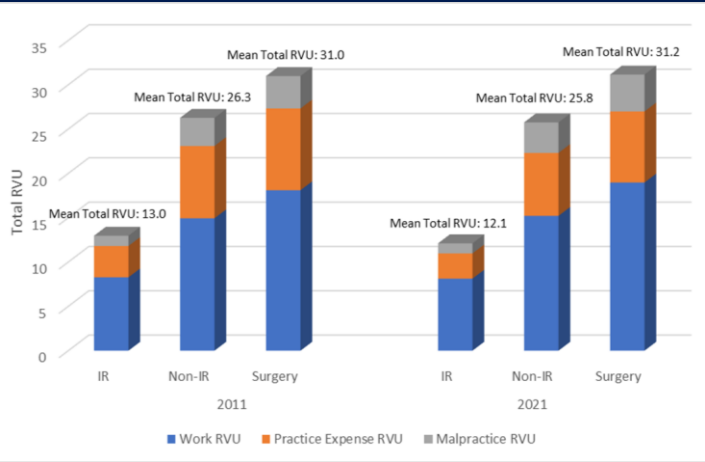


Figure 1. Mean total, work, practice expense, and malpractice RVU values for CPT codes associated with IR, all non-IR specialties, and general surgery/surgical subspecialties in 2011 and 2021.

Results:

- Work RVU decreased for twenty of twenty-eight (71.4%) CPT codes for IR procedures compared to seven of twenty-eight (25%) codes for procedures performed by other specialties from 2011-2021.
- Change in mean facility reimbursement for IR codes was -5.5% compared to 1.2% for all other specialties
- Change in mean total RVU was -6.6% for IR compared to -2.0% for all other specialties.
- Change in mean work RVU was -1.8% for IR compared to 1.8% for all other specialties. Change in mean practice expense RVU was -19.5% compared to -13.0%. The change in mean malpractice RVU was -1.5% compared to 8.7%.

Conclusions: IR procedures had higher reductions in reimbursement and RVU valuation relative to other specialties from 2011 to 2021. Interventional radiologists can use knowledge of this discrepancy in development of future payment policy.

Pathology	IR procedure	Facility fee change	Non-IR procedure	Facility fee change
Renal tumor	Percutaneous renal RFA	-7.3%	Surgical renal RFA	-1.8%
	Percutaneous renal cryoablation	-4.9%	Surgical renal cryoablation	-2.2%
Lung tumor	Percutaneous lung RFA	47.5%	Open pulmonary wedge resection	-2.7%
Liver tumor	Percutaneous liver RFA	-8.0%	Laparoscopic liver RFA	5.8%
Enteric access	Fluoroscopic gastrostomy placement	-11.3%	Endoscopic gastrostomy placement	7.6%
	Fluoroscopic jejunostomy placement	-8.0%	Endoscopic jejunostomy placement	-6.8%
	Fluoroscopic G to GJ conversion	-20.3%	Endoscopic G to GJ conversion	-7.0%
Ascites	Image guided paracentesis	-4.0%	Non-image guided paracentesis	2.6%
Pleural effusion	Image guided thoracentesis	0.1%	Non-image guided thoracentesis	1.4%
Bone tumor	Bone tumor RFA	-3.7%	Benign bone tumor excision	1.6%
Fibroids	Tumor/organ embolization	-8.6%	Myomectomy	-33.8%
Benign prostatic hypertrophy	Tumor/organ embolization	-8.6%	TURP	-14.3%
Cholecystitis	Cholecystostomy tube placement	-7.1%	Laparoscopic cholecystectomy	-6.8%
Thrombectomy	Percutaneous mechanical thrombectomy, arterial	-8.5%	Iliofemoral endarterectomy	-6.7%
Lung/mediastinal biopsy	Percutaneous lung/mediastinal biopsy	-4.9%	Transbronchial lung biopsy	-6.3%
Carotid stenosis	Carotid stenting	-13.1%	Carotid endarterectomy	2.0%
Brain aneurysms	Central nervous embolization	4.8%	Cerebral aneurysm clipping	1.7%
Portosystemic shunt	TIPS	-6.5%	Open portocaval shunt	61.9%
Pulmonary embolus	Transcatheter arterial thrombolysis	-3.8%	Pulmonary embolectomy	8.1%
Thoracic duct	Thoracic duct embolization	-7.1%	Thoracic duct ligation	-0.7%
Varicocele	Venous embolization	-5.6%	Varicocelectomy	-1.8%
Splenic trauma	Embolization of extravasation	-7.1%	Splenectomy	5.0%
Liver biopsy	Percutaneous liver biopsy	-1.3%	Liver wedge resection	6.64%
Varicose veins	Endovenous ablation of incompetent veins	-23.2%	Ligation of varicose veins	-3.7%
Lymph node biopsy	Perutaneous lymph node biopsy	-3.5%	Open lymph node biopsy	5.5%
Bone biopsy	Percutaneous bone biopsy	19.1%	Open bone biopsy	-34.7%
Mesenteric revascularization	Arterial stent placement	-5.9%	Mesenteric bypass	-9.3%
Lower extremity revascularization	Iliac stent placement	-5.5%	Aortofemoral bypass	-6.4%
Change in mean		-5.5%		1.2%

Table 1. Percent change in facility reimbursement from 2011 to 2021 for a matched set of IR and different surgical and minimally invasive procedures performed by other specialties.

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