

EXHIBIT NO. 5DATE: MARCH 11, 2005BILL NO. HB 457

March 10, 2005

Dear Senator:

Regarding: HB 457

I am an Interventional Radiologist writing this letter on behalf of all 10 members of Northwest Imaging P.C. practicing in Kalispell, MT. There have been recent objections to HB 457 raised by organizations with interests clearly outside of this state. What both the ACR (American College of Radiology of which I am a member) and the ASRT (American Society of Radiology Technologists) fail to understand is the practice of Radiology differs substantially in this state compared to more urban areas or even rural areas with proximity to urban areas. I trust the majority on your committee would consider themselves from a primarily rural area.

The proposed bill is exceedingly important for the continued and improved care of rural Montanans. The days of the small town Radiologist simply do not exist today. Small towns have lost these General Radiologists and larger groups have stepped in to provide their care remotely, reading their films through digital means. This has actually improved care for citizens of small towns as they now have direct access through digital technology to subspecialists not only in Diagnostic Radiology but other Medical specialists at those larger hospitals.

The drawback is that there are procedures which require a trained professional to perform. These include the much maligned but necessary "Barium Enema", a number of other gastrointestinal exams, arthrograms (placing a needle in a joint) and a few other exams. These are relatively infrequent procedures at smaller hospitals and it is not effective to have a Radiologist travel to all these locations each day. The result is patients wait, sometimes weeks or months for the procedure to be performed or they have to travel to the closest large town. Not only is this often difficult for the patient but it is also undesirable for the small town hospital as they lose revenue. Often, patients will continue to travel to the larger town for care, further harming the financial interests of the small town hospital, many of which need all the help they can get.

There are now highly trained "mid-level" professionals that are trained to perform these procedures under the direction of a Radiologist. This is a boon to rural Montana and their small town hospitals. We have 2 of these individuals who have graduated from accredited programs as Radiology Practitioner Assistants at Weber State University in Utah. They work closely with the Radiologists on a daily basis and patients are served daily. It is intuitively obvious in this State that these practitioners **must** be allowed to practice without "in house" supervision. Clinicians at our rural hospital have lauded our group and its forward thinking. Their patients are better served than ever. They receive around the clock Radiology coverage 365 days a year by a group of Radiologists covering all the major subspecialties with turn around times for their reports often more accurately measured in minutes than in hours and days. I have yet to find a clinician that would rather go back to their own on site Radiologist who was available less often and did not have the advantage of subspecialty training.

Passage of HB 457 will help assist in this forward thinking. This program adds **no cost to the system, improves the financial interest of rural hospitals and improves patient access** to procedures performed by a trained professional with proper supervision by a Diagnostic Radiologist. The reasons for passage of HB 457 are obvious. The arguments by

the ACR and ASRT may be valid in more urban areas, but they DO NOT make sense for rural Montana.

Thank you for your time.

Sincerely,

Hugh B. Cecil, MD  
Interventional Radiologist  
Northwest Imaging PC

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These facilities are currently serviced by Northwest Imaging P.C.:

Kalispell Regional Medical Center  
HealthCenter Northwest, Kalispell  
North Valley Hospital, Whitefish  
Eureka Prompt Care  
Polson Family Medical Clinic  
St Johns Hospital, Libby  
Blackfeet Community Medical Center, Browning  
Northern Rockies Medical Center, Cutbank  
Marias Medical Center, Shelby,  
Pondera Medical Center, Conrad