

X-ray rules keeping rural Ohioans from medical care



Your Turn

Alan Ayers
Guest columnist

Editor's note: *What do you think Ohio needs for a prosperous future for the entire state? Let us know in a letter to the editor of 200 words or less emailed to Letters@Dispatch.com. Include your full name, address and daytime phone number with your submission.*

The Dispatch recently called attention to the alarming number of rural Ohioans living in health care "deserts." When evaluating solutions, urgent care centers can also provide a basic level of care when rural hospitals close, alleviating the burden on emergency medical services and enabling primary care physicians to focus on chronic disease prevention and management.

As The Journal of Urgent Care Medicine reported in December, rural urgent care centers are growing 40% faster than their suburban counterparts, making them the fastest-growing solution for rural health care. The benefits to a ru-

ral community are significant and proven:

- In many rural communities, urgent care is the only medical access point.

- If there are other access points, their hours are often limited, whereas urgent care is defined by its extended evening and weekend hours.

- Many urgent cares, especially those in rural areas, also offer primary care services.

- Urgent care is an affordable option for services like sutures and X-rays that would cost a rural patient hundreds, if not thousands, of dollars in an emergency room.

- When patients depend on Ohio Medicaid to cover the costs, non-emergent emergency room visits cost Ohio Medicaid millions of dollars more than if those patients had access to urgent care.

Rural urgent care is working to increase access and lower costs in health care. That's why we see rural urgent care quickly filling in neighboring states like Kentucky and Indiana, but Ohio has seemingly been skipped over.

A major obstacle is Ohio's restrictive X-ray regulations, which do not exist in any other state. X-ray services not only

make rural urgent care economically viable, but they're essential for diagnosing fractures, pneumonia and other acutely rising conditions that, left untreated, can progress to something far more serious and costly to treat.

Yet, Ohio law requires X-rays to be performed by a certified radiologic technologist or a general X-ray machine operator under a physician's supervision. This creates an impossible barrier in rural settings:

- As with physicians, there's a national shortage of radiologic technologists. Rural providers cannot compete against urban medical centers for this finite labor pool, especially where radiologic technologists don't exist in rural areas.

- Further, because radiologic technologists are trained to operate many types of machines, such as CT and MRI, their pay is reflective of a greater skill set. This means in an urgent care where they only operate an X-ray, radiologic technologists are expensive and underutilized.

- What about general X-ray machine operators? As The Dispatch states, rural areas are suffering from a lack of doc-

tors. Almost all rural urgent cares are staffed by nurse practitioners or physician assistants — who, by Ohio law, cannot supervise general X-ray machine operators.

The result? Few urgent cares in rural Ohio, meaning one-third of rural counties in Ohio lack access to after-hours X-ray services outside of emergency departments, costing taxpayers millions in extra Medicaid expenditures.

Ohio policymakers must recognize that rural urgent care can be a great solution for rural health care, but only if the X-ray situation is solved.

By standardizing its X-ray regulations with other states, Ohio can dramatically improve healthcare access, save Ohio Medicaid millions and enhance primary care services for chronically underserved populations.

It's time for Ohio to stop being left behind.

Alan Ayers is an award-winning writer and is senior editor of The Journal of Urgent Care Medicine as well as president of Urgent Care Consultants. He has contributed hundreds of original articles and presentations on urgent care-related subjects.