About the Wisconsin Radiological Society

The purpose of the Wisconsin Radiological Society (WRS) is: Advancing the science of radiology, improving radiologic service to patients and the medical community, and studying the economics of radiology; the encouragement of improved and continuing education for radiologists; and the establishment and maintenance of high medical and ethical standards in the practice of radiology.

What is a Radiologist?

Radiologists are medical doctors (MDs) or doctors of osteopathic medicine (DOs) who specialize in diagnosing and treating diseases and injuries using medical imaging techniques, such as x-rays, computed tomography (CT), magnetic resonance imaging (MRI), nuclear medicine, positron emission tomography (PET) and ultrasound.

Radiological procedures are medically prescribed and should only be conducted by appropriately trained and certified physicians under medically necessary circumstances. Radiologist physicians have four to six years of unique, specific, post–medical school training that includes radiation safety and ensure the optimal performance of radiological procedures and interpretation of medical images.

Out-of-Network Billing Legislation

Conversations are taking place at the State and Federal level to address out-of-network bills that result in “surprise” costs for patients.

The American College of Radiology joined 100 other medical groups in supporting a set of joint principles related to surprise billing legislation released by the American Medical Association. To best protect patients, these principles include:

- Strong state and federal oversight and enforcement of network adequacy standards;
- Limit patient cost-sharing for unanticipated medical bills to in-network rates;
- Require patients to be notified in advance of anticipated out-of-pocket costs;
- Avoid arbitrary caps on payment for physicians treating out-of-network patients.
- Create an independent dispute resolution process for providers and insurers to use when the minimum payment standard is insufficient due to factors such as the complexity of the patient’s medical condition and other extraordinary factors.
- Provide physicians with direct payment/assignment of benefits from the insurer rather than putting patients in the middle.