A: That is the "crabs in a barrel" fiscal logic of Part B budget rules at work, where the only way to free up resources is to ignite a civil war in medicine. It's a flawed and destructive premise. Our payment system is fundamentally out-of-balance right now. The return on capital (e.g. fancy technology) and institutional support (e.g. hospital overhead) is way too high in ambulatory medicine, and the return on human judgment is way too low. I think many specialists (radiologists, cardiologists, etc) are presently being overcompensated for the technical component of their work and undercompensated for what we need from them the most: sound diagnostic decision making.