
 COMMENTARY

LINES FROM THE PRESIDENT: DEVELOPMENTS IN RVSS, 10CFR35, AND PET

For those of you watching this space for further adventures of the University of Virginia Hospital move, we moved March 20! About 140 patients were transported. There were two life-threatening emergencies, but these were handled by life-saving stations set up along the ¼ mile path. Needless to say, a whole nuclear medicine lab is not picked up and set back down in one day—our move was staged and has just been completed. There will be long lists of minor glitches for some time to come. On the whole however, this is giving us a wonderful boost.



Barbara Y. Croft, PhD

This year, with the Society's fiscal year 5/6ths over, has been quite a moving experience too. I wish I could say all our problems were solved, but we too have lists, this time of major problems, to be passed on to the next administration.

The Relative Value Scale (RVS) issue continues to bubble and boil. The Society/American College of Nuclear Physicians (ACNP) survey conducted by Abt Associates, yielded some very interesting data. There were charge data from about 700 practices; this was matched with physician demographic information. The most striking information was that physicians practicing nuclear medicine for 80% or more of their time charged 5% more than other nuclear medicine practitioners. In addition, there were variations in median professional charges between geographic regions of as much as 200% for some CPT-4 codes; the variations between regions were not consistent for all the surveyed codes.

The next steps we are taking are 1) to survey old and new Medicare allowed amounts compared to frequency and 2) to approach the drafters of the legislation and regulations with the data to point out that the conversion factors do not seem to be correct and that nuclear medicine, a separate imaging specialty, is taking a substantially larger cut than

diagnostic radiology. The faulty conversion factors seem to have been caused by the carriers' calculating based on a poor data base. We are urging the collection of better information by the carriers and a more graceful implementation after computer simulations.

Meetings during the first week of May with concerned parties from the Health Care Financing Administration (HCFA) and the Congress have produced promises to look at the processed data from the Abt survey. There are various possibilities for the Society and the College to pursue, ranging from an adjustment of the nuclear medicine relative values to the wholesale return of all fees for those practicing more than 50% nuclear medicine to the usual and customary fee schedule, with a 3% reduction effected. Conversations are continuing with HCFA, the Congress, and the American College of Radiology (ACR) on these topics. The ACR is investigating the conversion factors, at HCFA's behest. I feel that it is inappropriate for a large and powerful government agency such as HCFA to have to resort to the limited resources of a specialty society for such an investigation. In this area, I continue to urge the membership to reply to our questionnaires—they are the only source of real data that we have access to. In addition, the data that we are requesting could prove valuable to the practitioner in assessing the effect of the RVS on his practice income.

The RVS issue includes the Harvard Resource-Based Relative Value Scale (RBRVS). Four of our members are serving on a committee to collect and use magnitude estimation survey data to assign relative values for nuclear medicine. The crossover comparisons from one branch of medicine to another continue to be a problem. After our experience with the ACR RVS, it would seem that implementing an RVS across all medicine and being sure of the financial impact would be problematic. The 70000-series CPT codes we bill under should be among the simplest to calculate a correct conversion factor for; botching this project has made the carriers look like poor trustees for the larger RBRVS project.

The basic premises for Congressional action remain: the Federal budget is badly out of balance, the Medicare Part B expenditures are costing the government money, and physicians' professional charges have varied extremely from one practice and one geographic region to the next.

The Society's Government Relations Committee is continuing to work with the NRC on 10CFR Part 35, which concerns the medical uses by product material; we hope to have a petition for a new Part 35 soon. When it comes out, I hope that everyone will write the Nuclear Regulatory Commission with comments on it.

The Society and the ACNP formally requested HCFA to review the issue of reimbursement for certain positron emission tomography studies in early March.

The Food and Drug Administration continues to examine a number of New Drug Application submissions. The "Group" NDA for fluorine-18 fluorodeoxyglucose (¹⁸F-FDG) continues under consideration, while the United States Pharmacopoeial Convention, Inc. (USP) monograph on FDG is to come out in June. Those interested can obtain copies through the Society's Government Relations Committee or by addressing requests to Fatima Johnson, PhD, Drug Standards Division, The United States Pharmacopoeial Convention, Inc., 12601 Twinbrook Parkway, Rockville, MD 20852.

*Barbara Y. Croft
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SNM Executive Director Resigns for Education Post

Henry Ernstthal, CAE, our Executive Director, has submitted his resignation to the Executive Committee to be effective as of the end of the summer. Henry will become Executive Director of the Masters in Association Management Program at George Washington University in Washington, D.C. He also plans to consult in association management. To ensure a smooth transition, Virginia Pappas, CAE, currently Deputy Executive Director, will assume the day-to-day direction of the office on June 19, 1989, after the June meeting. She will be Acting Executive Director until Henry Ernstthal's replacement is named. During the summer, Henry will continue to participate in some very necessary special projects. At its June meeting, the Board of Trustees will be asked to concur with the subsequent choice of the Executive Committee, since there will not be another Board meeting for timely ratification of the choice. The timetable that has been decided upon has interviews taking place in the latter two weeks of July, with the choice following quickly thereafter.

The mechanism of the search process is that the President has appointed a Search Committee composed of Barbara Y. Croft, PhD, president, 1988-1989; Richard A. Holmes, MD, president, 1989-1990; recent past presidents, Howard J. Dworkin, MD, and Stanley J. Goldsmith, MD; two candidates for office in the 1989-1990 elections, Naomi Alazraki, MD, and Leon S. Malmud, MD; Capt. William H. Briner (ret.); and President of the Technologist Section, SNM, Author J. Hall, CNMT. The Executive Committee, at its April meeting, discussed the search and made suggestions. A consultant, or search firm, was chosen to consult with the committee and to do the more mechanical tasks such as advertising, receiving the inquiries and applications, winnowing the applications, and setting up interviews for the committee with the most promising candidates.

Henry Ernstthal has served as Executive Director of the Society for the past 10 years. This has been a period of greatly improved financial stability, thanks to Henry's efforts together with the Finance Committee's and Board of Trustees' dedication. Ten years ago, there was 12 days' worth of operating expenses in the bank; we now have about six months and could much more easily withstand a financial storm. Henry has provided budgets with strict accountability for each detail so that each effort can be examined microscopically.

Henry has proved successful as a manager in the central office as well as a diplomat in SNM Committee Meetings. He is turned to for legal advice very often and his sense of the political realities is very keen. He has very skillfully avoided becoming enmeshed in the members' political discussions, a terrible trap for society administrators.

We all wish Henry well in his new career and expect that we can continue to see him occasionally in his new roles.

Barbara Y. Croft