**COMMENTARY**

**NUCLEAR MEDICINE AND HEALTH CARE REFORM**

We are at a critical juncture in the history of medicine. In all likelihood, some form of health care reform legislation will be passed before the current Congressional session ends in August. Following the release of President Clinton's "Health Security Act" this past October, a myriad of other health care reform proposals have been presented by members of both parties. It is now up to several key committees in the Senate and the House of Representatives to sort out these proposals and work up a compromise bill which will be able to capture the required number of votes in Congress.

We in nuclear medicine have the best opportunity ever to improve the public's access to high quality nuclear medicine. The Commission on Health Care Policy has identified five goals which we would like to see included in health care reform. These goals are important to the future of nuclear medicine. As Chairman of the Health Care Reform Committee of the Commission on Health Care Policy, I recommend that all nuclear physicians, technologists, and others interested in affecting the outcome of health care reform contact their congressional representatives to express support for the concepts following.

1. **Protection of Patient Choice.** Whatever legislation is passed, the patient's ability to select his or her own nuclear medicine physician must be protected. All managed care and insurance plans should have open access for all willing and professionally qualified nuclear medicine physicians to participate as providers.

2. **Inclusion of Nuclear Medicine in the Basic Benefits Package.** The basic health care benefits package described in the proposed legislation and guidelines should include nuclear medicine by name. It is not enough to state only that "radiology procedures" will be included. Never before has there been greater need for nuclear medicine to speak with an autonomous voice while teaming with other specialists in a "partnership for action."

3. **Anti-trust Reform.** S. 1658 and H.R. 3486 were introduced in November by Senators Hatch and Thurmond and Representative Archer. These bills would provide increased protection to the formation of physicians' networks. To negotiate effectively with health planning organizations, nuclear medicine physicians should be encouraged to form independent professional associations (IPA's), either comprised solely of nuclear medicine physicians or multispecialty associations. The same principles are supported in the bill by Representative Thomas and Senator Chafee (H.R. 3704 and S. 1770).

4. **Increased Funding for Medical Research.** Funding for medical research should be increased. Medical research plays an important role in controlling health care expenditures. Representative Harkin and Senator Hatfield have introduced an amendment to the Clinton Health Security Act which would establish the Fund for Health Research. Monies for the fund would be generated by setting aside one percent of premiums collected by the alliances and by reestablishing a check-off for health research on federal income-tax forms. This fund would increase NIH funding by 50 percent.

5. **Increased Funding for Health Services Research.** Part of the premiums paid to alliances or other insurers should be allocated to support health care services research. The Health Security Act proposed by the Clinton administration (H.R. 3600) allocated $600,000,000 per year for this research, which is essential for the advancement of nuclear medicine procedures in health care delivery.

We must act now if we want to influence the content of the health care reform legislation. I urge members to contact the office of their representatives and senators and arrange a personal visit or telephone call. One may wish to contact their congressmen during the congressional recess; the Washington offices can provide the local telephone number. If one cannot schedule a personal discussion, a brief, one-page letter may suffice.

For further information, contact Sheryl Stern, Associate Director of SNM Division: Health Care Policy, at (212) 889-0717. We are interested in learning the outcome of any dialogue.

Henry N. Wagner, MD.

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**NEWS BRIEFS**

**Ward Valley Site Receives Court Approval**

In the continuing battle over a California low-level radioactive waste disposal site in Ward Valley (see Newsline, December 1993, p 17N), Los Angeles Superior court Judge Robert H. O'Brien stated that by law the California Department of Health Services (DHS) did not have to hold an adjudicatory hearing on whether it should issue a license to U.S. Ecology for the site. DHS issued the license last fall. Site opponents had pressed for such a hearing, as it would allow a chance for their more recently gathered information about the site to surface and perhaps help their case, and last November U.S. Interior Secretary Bruce Babbitt had delayed sale of the land to California until after the court ruling in case it called for a more extensive hearing on the land sale than the one he had proposed.

"Based on the extensiveness of the
discovery process," Judge Robert H. O'Brien wrote, "it is apparent that petitioners simply want to start the [license] application process all over again, with the Superior Court making the decision, and entirely ignoring the administrative process." Judge O'Brien added that earlier state court rulings had settled the matter. In May 1993, the state's Third Court of Appeal had dismissed requirements for adjudicatory hearings, and later the state's Supreme Court refused to review this decision.

Though Ward Valley opponents have the right to appeal the Los Angeles Superior Court ruling, Alan Pasternak, technical director for the California Radioactive Materials Management Forum (Cal Rad) noted that O'Brien was the fourth judge to rule that adjudicatory hearings are not necessary for issuing radioactive materials licenses.

The question of whether Sec. Babbitt will proceed with the sale is still open. He has asked the National Academy of Sciences (NAS) to review an official report by three geologists working out of the U.S. Geological Survey's (USGS) Menlo Park office. Though the USGS has disclaimed the report, the NAS review may take until December 1994. Several democratic U.S. Congressional leaders, such as Sen. Bennett Johnston (LA), Rep. Richard Lehman (CA), and Philip Sharp (IN), wrote letters to the White House in December and January, urging the Administration to support the Ward Valley disposal site, as federal interference works against the U.S. Low-Level Radioactive Waste Policy Act. Sen. Johnston wrote that imposing new, extra-legal requirements at this late date would be depriving California its right of due process. The future of the disposal site is now up to the Department of the Interior.

New Study on Radiation from Nuclear Activities

A new United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR) report confirmed that normal operations of peaceful nuclear activities contributes small amounts to total global radiation exposure compared to natural radiation sources. Military uses account for the greatest amount of radiation, as nuclear weapons test fallout is equivalent to 2.3 years of exposure to natural background radiation. The next highest exposure is natural source radiation itself (which is defined as one year exposure). But exposure due to the entire history of normal nuclear power operations accounts for 10 days equivalent exposure to natural radiation, and one year of nuclear power operations at current levels account for 1 day equivalent (severe nuclear accidents account for 20 days equivalent). Of special interest to nuclear medicine practitioners, medical exposures account for 90 days exposure to natural radiation.

But exposures listed in the report are averages across the entire world population, so individual exposures for certain types of radiation may vary dramatically. Nuclear weapons testing has spread fallout relatively evenly across the planet, while exposure from nuclear power plant accidents is more concentrated closer to the plants. Medical exposures may also vary by type, as a much higher proportion of the population is exposed to radiation for diagnosis than for radiation therapy. Even exposures to natural sources vary widely, as certain locales have a higher leakage of radon than others.

The report also compiled information on the biological effects of radiation, concluding that radiation is a weak carcinogen, with only about four percent of cancer deaths attributable to ionizing radiation.

Nuclear Institute Formed

To better counter the increasing public resistance to nuclear energy and promote its peacetime uses, four nuclear groups banded together in March to form the Nuclear Energy Institute (NEI). The new group will consolidate the lobbying and public relations efforts that the American Nuclear Energy Council, U.S. Council for Energy Awareness (USCEA), the Nuclear Management and Resources Council, and the Edison Electric Institute had managed. NEI's 400 members include research organizations, nuclear service companies, nuclear utilities, law firms, Wall Street firms, and labor unions. Former USCEA President Philip Bayne will serve as president and chief executive officer of the new organization.

"It's clear to everyone involved in this consolidation that the whole will be more than the sum of its parts," Mr. Bayne said. "By working together in a single organization, we will achieve synergies that are simply not possible in four separate organizations."

He said that the NEI will focus on the nuclear industry's top priorities: developing disposal facilities for low- and high-level nuclear waste; ensuring competitiveness of existing nuclear plants; and laying groundwork for new, more advanced plants. "We have worked with our member companies to set goals, and with their strong support we will [now] have the resources to achieve those goals," he said.

A 60-member board of directors will head NEI, and the board's 15-member executive committee will guide day-to-day policy decision-making. Bayne said this consolidation should result in savings for the member groups.

Society Survey of Member Activities

The Ad Hoc Committee of Research will soon conduct a survey among the SNM membership and wishes to draw the membership's attention to upcoming survey forms. The survey is to determine the membership's research activities and sources of support, training, and interest. Results will be used to help increase funding for nuclear medicine research and research training. The Society will also use them to determine the members' contributions to the advancement of clinical and fundamental applications of nuclear medicine to medical practice.

The committee urges all members to complete the survey form and return it to the SNM as soon as possible.

New NEMA Standard for Scintillation Cameras

The National Electrical Manufacturers Association (NEMA) recently published a newly revised and updated NU 1-1994 on "Performance Measurements of Scintillation Cameras." This revision, taking the place of its predecessor, NU 1-1986, has performance standards for both single crystal and multiple crystal cameras and features new tests that reflect
recent advances in SPECT technology. NEMA test procedures have set the nuclear medicine standard for testing and determining gamma camera performance since 1981, and the association will promote NU 1-1994 at its booth at the SNM annual meeting in Orlando this June.

**Visas for World Federation**

U.S. citizens planning to attend the World Federation of Nuclear Medicine and Biology in Sydney, Australia this fall need to obtain visas from the Australian embassy in either New York or Los Angeles well before departure. As this process can take several weeks, prospective travelers should begin planning at once.

**O’Leary Comes to SNM**

Department of Energy Secretary Hazel O’Leary will speak to the Society of Nuclear Medicine at the business meeting in Orlando, Sunday, June 5. Sec. O’Leary’s department has been a long-time backer of nuclear medicine, supporting basic more than clinical research, and pivotal in such vital areas as molybdenum supply, the National Biomedical Tracer Facility, and the issue of informed consent. Sec. O’Leary will make a presentation about the agency’s research programs, and interested SNM members attending the meeting should watch for further details.

**ICRP Document Available at Annual Meeting**

“Radiation Protection of the Patient in Nuclear Medicine,” a pamphlet produced by the International Commission on Radiological Protection, will be available free of charge at the Publications Booth during the SNM Annual Meeting.

Although the pamphlet will not be on display, attendees may request the document from any of the personnel staffing the booth.

**HCFA Attending Physician Requirements**

Even since the Medicare program began, the definition of attending physician and the requirement for his or her physical presence while administering care have been debated. Recently, the Health Care Financing Administration (HCFA) agreed to publish a regulation clarifying Medicare payments for attending physician services, which will appear in the Federal Register next summer and will supersede a memorandum on the matter from December 1992.

The 1992 memo gave a very strict definition of physical presence, causing an uproar in academic medicine and medical societies. HCFA contended that if the teaching physician was not present, the services were unbillable and must be paid through direct medical graduate education funds. Though HCFA has not generally used this interpretation to collect funds during an audit, this could change.

Until the new rule is published next summer, interim Medicare carrier policies for attending physician billing remain in effect. To be “an attending physician,” the teaching physician must be physically present while the resident performs the procedure’s critical portions.

**Nuclear Oncology in Istanbul**

The Turkish Society of Nuclear Medicine (TSNM) will host the First International Congress of Nuclear Oncology along with its Eight Annual Meeting, on June 19-23, 1994. The double meeting will take place at the Istanbul Hilton, with the exhibition center at the Istanbul Hyatt. For more information, contact Professor Coksun Bekdik, MD, president of the TSNM, Hacettepe University, Faculty of Nuclear Medicine, 06100, Ankara, Turkey, or Tunali Hilmi, Caddesi, Buklum Sokak, 63172; 06700 Kavaklidere, Ankara, Turkey; tel (90-4) 168 28 25; fax (90-4) 127 10 73.