

From the Newsline Editor

In this issue we continue our annual review of nuclear medicine in 2009, begun in the February 2010 issue of Newsline. As noted in this column last month, the health care and molecular investigational and clinical scenes are changing so rapidly that it is almost impossible to take our collective pulse at any single moment, much less offer sophisticated prognoses about where we will be in 5 mo or

5 y. The news and insights provided by our Newsline annual review contributors are especially valued, because they offer the opportunity to take stock of the past year's successes and challenges and to anticipate events in the coming year.

*Conrad Nagle, MD
Editor, Newsline*

From the SNM Health Care Policy and Practice Commission

This has been a critical year for nuclear medicine practitioners. Health care reform has been the major topic in Washington, eclipsing 2 ongoing wars and 1 of the worst economic crises since the great depression. As I write this, the fate of health care reform is increasingly uncertain, reimbursements remain unresolved, and we continue to face the prospect of shortages of ^{99}Mo generators for much of 2010. These are among the issues addressed by the SNM Health Care Policy and Practice Commission in 2009. SNM has more than 15,000 members, yet it is a relatively small player in Washington—nevertheless, we can be effective in areas most closely related to molecular imaging and nuclear medicine.

There were some successes in 2009. Ongoing efforts by SNM staff and leadership to get a bill through Congress to create a domestic supply of ^{99}Mo made significant progress. SNM continues ongoing talks with the Centers for Medicare & Medicaid studies about reimbursement issues, especially for high-cost radiopharmaceuticals. A major concern is the proposed cuts in reimbursement. SNM is working together with other involved societies, including the American College of Radiology (ACR) and the American College of Cardiology (ACC), to prevent major cuts in this area. Whether we will be successful is yet to be seen.

Much of the commission's work this year has been to ensure that nuclear medicine professionals are represented when appropriateness criteria and practice guidelines are published. Overutilization of imaging procedures has been

a favorite topic of critics of our health care system. Appropriateness criteria help to ensure that tests are performed for the right reasons. The government and payers are pushing for the development of outcomes-based appropriateness criteria. This is a time-consuming and expensive process, and outcomes data do not exist for most imaging procedures.

SNM established ongoing relationships with other professional societies to develop joint guidelines based on the best available evidence. Such guidelines should have more authority than those published by a single society. We have worked to have SNM representatives to the ACC, ACR, American Society of Clinical Oncology, and other organizations involved in publishing guidelines that affect nuclear medicine.

The future of U.S. medical care is uncertain. Even if a health care reform bill is passed, we will not know its effects on molecular imaging and nuclear medicine for several years. It is important that SNM remain a strong and vibrant organization if we are to maintain some say in our future.

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Warren R. Janowitz, MD, JD

From the SNM Commission on Education

The second year of the 2008–2010 Education Strategic Plan focused on maintenance of certification (MOC) requirements, CT education, molecular imaging (MI), and 2 technologist initiatives.

SNM's premier online education activity, the Lifelong Learning and Self-Assessment Program, continues to be a primary resource for meeting MOC self-assessment requirements for diplomates of both the American Board