

## Advocating for Expanded Access

*Richard Wahl, MD, SNMMI President*

**A**dvances in medicine are being made every day across the globe, revolutionizing the diagnosis and treatment of a wide variety of diseases. However, if not accessible to the patients who need them, these medical innovations are essentially ineffective.

The field of nuclear medicine and molecular imaging has produced many new advances in the past few years—the development of imaging agents for prostate cancer, Alzheimer disease, and breast cancer among the most recent. To ensure that patients have access to these advances, the SNMMI is working diligently to educate lawmakers, payers, physicians, and other government agencies about diagnostic radiopharmaceuticals.

In partnership with the Council on Radionuclides and Radiopharmaceuticals and the Medical Imaging and Technology Alliance, SNMMI has helped develop major legislation, the Facilitating Innovative Nuclear Diagnostics (FIND) Act of 2021 (H.R. 4479/S. 2609), to address the imbalance in Medicare's reimbursement structure for radiopharmaceuticals. Medicare currently packages payment for diagnostic radiopharmaceuticals into the payment for molecular imaging tests conducted by nuclear medicine providers in hospital outpatient facilities. These packaged rates are often the same, whether they involve a high-volume, lower-cost diagnostic radiopharmaceutical or a low-volume, higher-value precision diagnostic tool that can facilitate more targeted treatment. As a result, Medicare reduces reimbursement for the higher-cost products to the point that providers simply cannot afford to provide these services, limiting or preventing their availability to patients.

If passed, the FIND Act would ensure that Medicare patients have access to precision diagnostic nuclear imaging studies prescribed by their physicians, when clinically appropriate, and that hospitals are appropriately reimbursed for the cost of such tests. This bill would significantly expand patient access to life-saving imaging agents. I encourage all U.S. members of the nuclear medicine and molecular imaging field to contact their members of Congress and share their support for this important bill. Representatives and senators can be contacted through SNMMI's dedicated FIND website at: <https://snmmi.quorum.us/campaign/34856/>. Every voice matters in helping to pass the FIND Act.

SNMMI is working to educate payers and physicians about issues with the payment structure for diagnostic radiopharmaceuticals. SNMMI is also reaching out to patients regarding the FIND Act. It is critical that patients help us

gain traction for this bill by informing their providers when appropriate access is not available.

In addition to the access issues addressed by the FIND Act, patients face other challenges in receiving innovative nuclear medicine procedures to guide their treatment. With any new medical advance, physicians question how to make it available and how to ensure it is paid for. This is happening right now as providers try to navigate use of the newly U.S. Food and Drug Administration–approved prostate-specific membrane antigen (PSMA) imaging agents. To make the process as easy as possible for physicians, a new set of appropriate use criteria has been developed to guide the use of PSMA PET imaging agents. SNMMI developed the criteria in collaboration with the American College of Nuclear Medicine, American Urological Association, Australia and New Zealand Society of Nuclear Medicine, American Society of Clinical Oncology, European Association of Nuclear Medicine, and American College of Physicians. The National Comprehensive Cancer Network (NCCN) has also issued new guidelines for PSMA PET imaging. Many physicians consider NCCN guidelines to be the standard for cancer care, and these guidelines will assist physicians in use of the new agents to improve care and outcomes for patients with prostate cancer.

In another area of advocacy, SNMMI has been successful in working with the Centers for Medicare and Medicaid Services (CMS) to retire the National Coverage Determination (NCD) for <sup>18</sup>F-FDG PET for infection and inflammation imaging. In the absence of an NCD, coverage determinations for PET for infection and inflammation are now made at the discretion of local Medicare Administrative Contractors. Removal of this NCD was accomplished after many discussions and sharing of guidelines and evidence by the SNMMI, American College of Radiology, and American Society of Nuclear Cardiology. This effort and the CMS decision have opened up a path to reimbursement that ultimately will improve access for patients to valuable nononcologic use of FDG PET.

SNMMI is constantly working to make sure that advances in nuclear medicine and molecular imaging are easily available to patients and reimbursed appropriately. We will continue to advocate for expanded access in our efforts to improve the health of patients everywhere.



**Richard Wahl, MD**