

GOVERNMENT RELATIONS AND HEALTH CARE POLICY UPDATE

ACNP/SNM File Petition and Seek Assistance from President

Back in January, the ACNP and SNM finally filed the petition with the Nuclear Regulatory Commission (NRC) to rescind portions of 10 CFR Part 35 and to institute a regulatory program better suited to the minimal risks presented by diagnostic nuclear medicine. The petition was mailed to the Secretary of the NRC, and each of the NRC Commissioners received a copy along with a cover letter detailing our points. Copies of the petition, press release and cover letters are available on the web site of both SNM (www.snm.org) and the ACNP (www.acnponline.org). In the NRC response document, the petition was given docket number PRM-35-16, and we were told that we would be informed "...of the status of your petition as staff action on it progresses". Because we believe that the petition needed to be seen by more than just the staff at the NRC, we also sent copies to members of Congress, President George W. Bush, and the Office of Management and Budget (OMB).

The NRC reports to several committees in both the US House of Representatives and the US Senate. Each of these committees controls different aspects of the commission, from budget to scientific administration. If the petition fails, we may be able to seek relief from Congress; in our letter to the members of congress, we explained that we were running out of avenues to remove the unnecessary regulatory burden inflicted on diagnostic nuclear medicine by the NRC's regulations.

In our letter to the President, we informed him of nuclear medicine's safety record, of our petition, and of the need for regulatory relief. We also reminded President Bush that both his parents have benefited from nuclear medicine procedures.

Our best chance of intervention probably lies with the OMB. The OMB must approve 10 CFR Part 35 prior to its becoming a law, which will satisfactorily prove that the agency's regulation is not in conflict with the paper-work reduction act. In our letter to the OMB, we stress that the regulation is incredibly burdensome to an industry

with such a low risk and that it will increase the cost of health care.

Follow-up visits are planned with Congress and the OMB.

Two NM APC Task Force Members Selected for HCFA Advisory Panel on APCs

On December 5, 2000, the Health Care Finance Administration (HCFA) announced that it was seeking nominees for a newly formed task force, the Advisory Panel on APCs (Ambulatory Payment Classification). Nominees for the committee were expected to be representatives of the Medicare providers that are subject to outpatient prospective payment systems (OPPS), with technical or clinical expertise in any of the following: hospital payment systems, hospital medical care delivery systems, outpatient payment requirements, APC groups, payment/use of drugs in an outpatient setting, and payment for partial hospitalization services.

The Nuclear Medicine APC Task Force has been working on the APC system for several years, and is fortunate to have among its members nuclear medicine professionals who more than meet the required qualifications expected for nominees of the HCFA Advisory Panels. The APC Task Force is extremely pleased that 2 members, Robert Henkin, MD, and William Van Decker, MD, were selected for the Advisory Panel. We are sure that they will be an asset to both the medical community and HCFA in their advisory capacities.

The Advisory Panel is established for 2 years and is scheduled to meet once each calendar year. The first meeting of the Advisory Panel on APCs was February 28, 2001 through March 1, 2001. According to the Federal Register announcement, "The purpose of the panel is to review the APC groups and their associated weights and advise the Secretary and the Administrator of the Health Care Financing Administration (HCFA) concerning the clinical integrity of these groups and weights, which are major elements of the hospital outpatient prospective payment system (OPPS)."

Assault on the Hill a Success

The SNM Tech Section, along with the rest of the Alliance for Quality Medical Imaging, arrived on Capitol Hill on the afternoon of Thursday,

March 1st prepared to convince Congress of the importance of national licensure. The activities began early that morning with a briefing on the licensure movement. Then the group was given a quick lesson on how to lobby members of Congress. As our Director of Public Affairs, Bill Uffelman, reminded them, "They need to hear about this bill from you because you're in the profession. You know what is required to do these imaging procedures."

After the lobbying basics were explained, the Alliance members were brought to the steps of the Capitol to have a picture taken with the new sponsor of the Consumer Assurance of Radiologic Excellence Act (CARE), Representative Heather Wilson. Once the photo was taken, it was off to work. Alliance members were broken up into 5 groups representing the Mid-Atlantic, Great Lakes, New England, North and South, and East and West Regions. Bill Uffelman led the New England group, which visited the health care staff members of Representatives John Olver from Massachusetts, John Larson from Connecticut, Representative Carolyn Maloney of New York, and Senator Hillary Rodham Clinton of New York.

The goal was to get cosponsors for the CARE Act, and while none of the staffers were willing to promise that their Senator or Representative would sign on, we did receive very positive feedback.

—by Amanda Sullivan, SNM Project Manager of Health Care Policy, and William Uffelman, SNM Director of Public Affairs and General Counsel

VOICE BOX

Speedy CE: Balancing the Need for Education with the Need for Efficiency

National, chapter and local Nuclear Medicine meetings are designed not only to educate the technologist, but also to provide the credits needed for credentialing or licensure. In addition, they are a great time to renew friendships and exchange ideas. We take for granted the availability of these meetings and our opportunities to attend them.

Many technologists, however, are not so fortunate. They live in outlying areas