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2021 Summer Commission & Committee Interim Reports

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Summer 2021 — Interim Report

Commission on Body Imaging

Andrew B. Rosenkrantz, MD

Committee Update:

Colon Cancer Committee

- The United States Preventive Services Task Force (USPSTF) released its final updated recommendations for colorectal cancer screening in May. The Task Force assigned an "A" rating for colorectal cancer screening of all adults ages 50 to 75 years and a "B" rating for screening adults ages 45-49. CT colonography is listed as one of several colorectal cancer screening options. The Colon Cancer Committee strongly supports the new guidelines and is working to develop a strategy on the timing of asking the Centers for Medicare and Medicaid Services (CMS) to reopen its National Coverage Determination process for CT colonography. In addition, the Committee is working to ensure that private insurers update their coverage policies as required by the Affordable Care Act.

Duel-Energy Computed Tomography (DECT) Resources

- The Commission on Body Imaging is exploring development of a white paper on DECT. Such a white paper will allow the ACR to establish consensus from the available literature. Furthermore, it could serve as a resource and focus the discussion on various other documents, including practice parameters and appropriateness criteria.

Committee on Cardiovascular Imaging

- ACR–NASCI–SPR practice parameter for the performance of quantification of cardiovascular computed tomography (CT) and magnetic resonance imagined (MRI) – **Chaired by Drs. Andrew Rivard and Larissa Casaburi. Currently in the revision process.**

Committee on Thoracic Radiology

- ACR–SPR–STR practice parameter for the performance of portable (mobile unit) chest radiography – **Chaired by Dr. Subba Digumarthy. Currently in the revision process.**
- ACR–SPR–STR practice parameter for the performance of chest radiography– **Chaired by Dr. Subba Digumarthy. Currently in the revision process.**

Committee on Musculoskeletal Imaging

- ACR–SABI–SPR–SSR practice parameter for the performance of magnetic resonance imaging (MRI) of the wrist – **Chaired by Drs. Naveen Subhas and Fangbai Wu. Completed revision process. Ready for 1st Field Review.**
- ACR–ASSR–SPR–SSR practice parameter for the performance of spine radiography – **Chaired by Dr. Mary Jesse. Completed revision process. Preparing draft for 2nd Field Review.**

Committee on Abdominal Imaging

- ACR-SPR practice parameter for the performance of modified barium swallow – **Chaired by Dr. Mary Turner. Currently in revision process.**
- ACR practice parameter for the performance of hysterosalpingography – **Chaired by Dr. Olga Brook. Currently in final stages of revision process.**

Body Imaging Sponsored Parameters

- ACR–SPR practice parameter for performing and interpreting diagnostic computed tomography (CT) – **Chaired by Dr. Benjamin Yeh. Currently in final stages of revision process.**
- ACR practice parameter for performing and interpreting magnetic resonance imaging (MRI) – **Chaired by Dr. Gia DeAngelis. Currently in final stages of revision process.**

Areas of Concern:

Key areas of concern for the ACR, Board of Chancellors or profession moving forward include:

- Obtain Medicare coverage for CT colonography and ensure patient access to CT colonography for colorectal cancer screening when coverage is available.
- Ensure patient access to lung cancer screening through appropriate reimbursement and coverage in all settings.

Member Value:

Committees under the Commission on Body Imaging provide a broad range of benefits to ACR members including but not limited to input into the development of the Reporting and Data Systems (RADS), Practice Parameters and Technical Standards and incidental findings publications. In addition, Commission members work hard to ensure appropriate coverage and reimbursement for lung cancer screening and CT colonography.

Commission on Breast Imaging

Chief: Stamatia Destounis, MD, FACR

Commission Update:

- **Government Relations Committee (Bethany Neill, MD, Chair)** –
  - Federal
    - PALS - On July 21, U.S. Sens. Dianne Feinstein (D-Calif.) and Marsha Blackburn (R-Tenn.) and Reps. Debbie Wasserman Schultz (D-Fla.) and Fred Upton (R-Mich.) introduced the Protecting Access to Lifesaving Screenings (PALS) Act of 2021 (S.2412/H.R.4612). The legislation would postpone recognition of controversial (2009 & 2016) recommendations from the U.S. Preventive Services Task Force (USPSTF) that could limit access to breast cancer screening coverage requirements of the Affordable Care Act. The legislation proposes to continue a moratorium on the USPSTF recommendations, which Congress has extended several times but is set to expire Jan. 1, 2023. It would make changes from the current PALS Act statute, including: extension of the PALS Act moratorium through Jan. 1, 2028; clarification that service women should benefit from this same screening mammography protection starting at age 40; addition of clarifying statutory language that specifies "all modalities" is intended to include breast tomosynthesis because some insurers have failed to cover 3D mammography claiming the statutory language is unclear.
    - On May 6, 2020, The U.S. Preventive Services Task Force posted today a final research plan on screening for breast cancer. The final research plan is available here. It will likely be several months before the draft evidence review and draft recommendation are completed and released for public comment.
  - State
    - TX SB 1065 (signed by the Governor) Coverage of follow up work-ups. Requires that a health benefit plan that provides coverage for a screening mammogram provide coverage for diagnostic imaging, rather than a diagnostic mammogram, that is no less favorable than the coverage for a screening mammogram. "Diagnostic imaging" is defined as an imaging examination using mammography, ultrasound imaging, or magnetic resonance imaging that is designed to evaluate among other conditions, a subjective or objective abnormality detected by a physician or patient in a breast or to evaluate an individual with a personal history of breast cancer or dense breast tissue.
    - RI SB 651 RI passed a bill into law that allows results of mammograms to be sent to patients "by mail, electronically, or otherwise" in a timely manner to accommodate posting results on secure patient web portals.
    - LA SB 119 (signed by the Governor) New law adds stipulations of preferred modalities into existing framework of screening guidance.

        - (1) (a) Regarding the single baseline mammogram for women 35-39, provides for annual MRI starting at age 25 and annual mammography starting at age 30, if there is a hereditary susceptibility from pathogenic mutation carrier status or prior chest wall radiation. (b) Provides for annual mammography (DBT preferred modality) and access to supplemental imaging (MRI preferred modality) starting at age 35 if recommended by the woman's physician and the woman has a predicted lifetime risk greater than 20% by any model, a strong family history, or a higher risk of a diagnosis of breast cancer at an earlier age based on ethnicity or race.
        - (2) Annual mammography (DBT preferred modality) for any woman who is forty years of age or older. (a) Consideration given to supplemental imaging, if recommended by her physician, for women with increased breast density (C and D density). (b) Access to annual supplemental imaging (MRI preferred modality), if recommended by her physician, for women with a prior history of breast cancer below the age of fifty or with a prior history of breast cancer at any age and dense breast (C and D density).

- **Economics Committee (Meg Flemming, MD, Chair)** - No update
- **Communications Committee (Sally Friedewald, MD, Chair)** - No Update
- **BIRADS Committee (Mimi Newell, MD, Chair)**
    - CEM Supplement – Dr. Lee and her workgroup have completed their draft for this and are currently working on selecting the images that they will use for illustrations and writing captions for those images. Dr. Lee expects to have everything in ACR hands by September/October.
    - BI-RADS® Atlas 6th Edition – Work on the new edition has been proceeding according to our proposed timeline. The four subcommittees (Mammography, Breast Ultrasound, Breast MRI, and Auditing and Outcomes Monitoring) have been meeting regularly by conference call and progressing steadily.
    - BI-RADS® to the RADS group under the Quality & Safety Commission. Though, because of the nature of the work, BI-RADS® will continue to keep the Breast Imaging Commission updated on what is happening with the atlas and its related activities and will continue to hold a seat on the commission as a liaison.
- **Appropriateness Criteria and Practice Parameters Committee (Linda Moy, MD, Chair)**
    - Below is a list of breast practice parameters that were adopted this past May at the Annual Meeting, and will become effective October 1, 2021:
        1. ACR Practice Parameter for the Performance of Preoperative Image-Guided Localization in the Breast – NEW DOCUMENT.
        2. ACR Practice Parameter for the Performance of Magnetic Resonance Imaging-Guided Breast Interventional Procedures – Revised.
        3. ACR Practice Parameter for the Performance of a Diagnostic Breast Ultrasound Examination – Revised.
        4. ACR Practice Parameter for the Performance of Ultrasound-Guided Percutaneous Breast Interventional Procedures – Revised.
    - Below is a list of breast documents that are being revised for the 2022 cycle:
        - ACR Practice Parameter for the Performance of Molecular Breast Imaging (MBI) Using a Dedicated Gamma Camera – Revised.

- ACR–AAPM–SIIM Technical Standard for Determinants of Image Quality in Mammography – Revised.

- **Screening and Emerging Technology (Peter Eby, MD, Chair)** – The Screening & Emerging Tech Committee is currently working with EPIC to pilot data. They are awaiting word from EPIC's board meeting that took place on July 21st to see if they will be able to make the change they have suggested. In the meantime, they are working with ACR's registry team to add MOD as a data element to NMD. In addition, members are working together to come up with a powerpitch to present at several national meetings.

Breast Screening Leadership Group

- Sally Friedwald, MD took over as chair for the Screening Leaders Group. Monthly webinars continue in 2021, planning is underway.

Areas of Concern:

The commission continues to be very concerned about maintaining access to annual screening mammography staring at age 40 and the potential impact of implementation of the USPSTF and ACS screening recommendations on the women of the United States. In addition, the commission is now focused on how breast radiologists and their practices can improve the overall health and wellness of our patients, the issue delayed diagnosis and care of breast cancer due to the COVID-19 pandemic, and the disproportionate impact of guidelines that do not include annual screening mammography beginning at age 40 in minority populations.

Member Value:

The Commission continues to fight for annual screening for all women 40 years and older.

Commission on Economics

Gregory N. Nicola, MD, FACR, Chair

Commission Update:

COVID-19

The ACR continues to monitor policy changes related to the COVID-19 public health emergency (PHE) declaration. On July 20, the PHE was extended 90 days, through October 18, with anticipation of further renewal. This includes COVID-19 related executive orders, legislation, and interim-final rule making documents.

This includes temporary changes such as:

- Telehealth availability, payment and coverage.
- Supervision requirements of hospital patients, procedures and therapy services.
- Changes to Stark Laws.
- Updates of impacts of policy changes such as freeze on sequestration, GPCI updates and coverage determinations.
- Changes in MIPS, the Medicare Shared Savings Program (MSSP) ACOs, and flexibilities for Advanced Alternative Payment Models.
- Options for Advance/Accelerated Payments.
- Updates to the HHS Provider Relief Funds and opportunities for funding for members.

In particular, the ACR will monitor policy changes which directly or indirectly affect radiology and what updates we shall recommend during and once the crisis resolves.

Medicare Physician Fee Schedule (MPFS)

The Centers for Medicare and Medicaid Services (CMS) released the 2022 Medicare Physician Fee Schedule proposed rule on July 13. CMS estimates an overall impact of the MPFS proposed changes to radiology to be a 2% decrease, while interventional radiology would see an aggregate decrease of 9%, nuclear medicine a 2% decrease and radiation oncology and radiation therapy centers a 5% decrease if the provisions within the proposed rule are finalized. Part of the decrease is due changes in RVUs, redistributive effects of the CMS proposed clinical labor pricing update, and phase-in implementation of the previously finalized updates to supply and equipment pricing.

The Consolidated Appropriations Act, 2021 (P.L.116-260) included a 3.75% adjustment to the 2021 conversion factor which contributed to the reduction of payment cuts to radiologists from 10% to approximately 4%. If Congress does not intervene and there is no 3.75% bump to the proposed 2022 conversion factor, the potential higher end of the overall percent reduction for 2022 is approximately 6% for radiology, 13% for interventional radiology, 5% for nuclear medicine, 14% for radiation therapy, and 8% for radiation oncology. The ACR staff generated a detailed summary of the rule. The ACR and the ACR Commissions on Economics and Quality and Safety continue to review CMS' proposals and will draft and submit comments to CMS by its Sept. 13 deadline.

Clinical Labor Pricing Update

CMS is proposing to update their prices for clinical labor staff, which has not been updated since 2002. This review is partially in response to the recent efforts to update the supply and equipment prices, and also due to stakeholders' concerns about clinical labor costs not being reflective of current wages. Updating the clinical labor would also maintain relativity within the direct PE, since the supply and equipment are reaching the end of their four-year phase-in. CMS is considering a four-year phase-in of the updated clinical labor pricing, similar to what they did for the supply and equipment pricing updates.

Protecting Access to Medicare Act (PAMA) Appropriate Use Criteria (AUC) Mandate Implementation

- The "educational and operations testing period" for the PAMA AUC program began on January 1, 2020, and last summer was extended through December 31, 2021. During this time, penalties do not apply for failure to correctly report AUC consultation information, including claims that do not include any consultation information. The College encourages AUC reporting during the educational and operations testing period to ensure a smooth transition when penalties will apply.
- The 2022 Medicare Physician Fee Schedule (MPFS) proposed rule included a proposal to delay the penalty phase of the PAMA AUC program until January 1, 2023 or the January 1 following the end of the COVID-19 public health emergency, whichever is later. In addition, providers who continue to face implementation issues as a result of COVID-19 hardships will be able to use the significant hardship modifier if the proposals are finalized as written.
- The MPFS also included proposals to address outstanding claims processing issues, including how to identify claims that are not subject to the AUC consultation mandate (i.e. critical access hospitals and Maryland Total Cost of Care Model) and how to handle an order change. Details may be found in the ACR's MPFS proposed rule detailed summary.

Hospital Outpatient Prospective Payment System (HOPPS)

- In February 2021, the HOP/APC Committee submitted a comment letter to CMS regarding the new and bundled CPT codes for CY 2022. In the letter, the Committee thanked CMS for the new creating of new CPT codes to improve the accuracy and predictive abilities of bone density measurement to better diagnose and treat patients at risk for osteoporotic related fractures.
- On July 19th, 2021 CMS released the CY 20222 HOPPS proposed rule. Within the rule, CMS maintained the 7 imaging APCs, but reassigned codes within these APCs.

Hospital Inpatient Prospective Payment System (IPPS)

- On August 2nd, 2021 the Centers for Medicare and Medicaid Services (CMS) released the fiscal year (FY) 2022 Hospital Inpatient Prospective Payment System (IPPS) final rule.
- CMS approved 19 technologies that applied for new technology add-on payments (NTAP) for FY 2022. CMS did not approve the NTAP application for Aidoc Briefcase for PE as CMS found that they did not meet the substantial clinical improvement requirement. When responding to comments, CMS noted they will continue to consider how technologies may be used to identify a unique mechanism of action; how updates to AI, an algorithm or software would affect an already approved technology or a competing technology; whether software changes for an already approved technology could be considered a new

mechanism of action, and whether an improved algorithm by competing technologies would represent a unique mechanism of action if the outcome is the same as an already approved AI new technology.
- NTAP for Caption Guidance™ (an artificial intelligence (AI) guided medical imaging acquisition software system indicated for the acquisition of cardiac ultrasound images) was approved.
- The FY 2022 IPPS proposed rule addressed several provisions relating to direct graduate medical education (GME). The Consolidated Appropriations Act, 2021 (CAA) contained 3 provisions affecting Medicare direct GME and indirect medical education (IME) payments to teaching hospitals, and due to the large amount of comments, CMS will address comments in separate rule making.

Artificial Intelligence

- Most of the AI code applications are for Cat III codes. Category III codes are created to track emerging technologies. Reporting these tracking codes aids in the proper assignment of a code descriptor and valuation of the codes when reviewed by the Relative Value Update Scale Committee (RUC) when those codes finally receive Category I code status. Because Category III codes are not valued by the RUC, payment is at the discretion of the individual payers. If the AMA CPT Editorial Panel successfully accepts the AI code proposals submitted, there is no guarantee of reimbursement. Any payment policy for these codes would be determined at the payor's discretion.
- Radiology has not submitted any Cat I AI codes for valuation, but we are closely following related discussions at the RUC and from CMS.
- In the NPRM 2022, CMS is requesting stakeholder feedback on emerging technologies that involve advances such as artificial intelligence (AI). CMS wants to better understand how AI technologies and software contribute to physician work, as well as the resource costs associated with these procedures. These new technologies often involve software algorithms or licensing fees that are not currently captured in the direct PE methodology. CMS is soliciting feedback on the effects of AI on physician work, time and intensity, how to best capture AI costs, the risk of fraud and abuse over its utilization, and how it contributes to improvements in quality of care.

Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)

- Following the release of the CY 2022 Medicare Physician Fee Schedule (MPFS) proposed rule in July, the MACRA Committee and staff continue to stay informed and analyze changes to the Quality Payment Program (QPP). The MACRA Committee is meeting in August to discuss areas for comment on the MPFS proposed rule relating to MIPS, MIPS Value Pathways (MVPs), and other concerns.
- MACRA Committee and ACR staff continue to track COVID-19 flexibilities surrounding Merit-based Incentive Payment System (MIPS) reporting and Alternative Payment Models (APMs).
- Members of the MACRA Committee remain engaged with MACRA Episode-Based Cost Measure Clinical Subcommittees, coordinated by Acumen, LLC on behalf of CMS. A committee member, Dr. Seidenwurm, is currently serving on Acumen's Clinical Expert Workgroup for Wave 4 of Cost Measure Development- Low Back Pain.
- Members of the MACRA Committee and ACR staff continue to follow the development of the Radiation Oncology (RO) Model. In July, CMS released the HOPPS proposed rule

which included proposed changes to the RO Model. The model is set to being January 1, 2022 and remains mandatory. The MACRA Committee continues advocacy efforts with ACR RO leadership and ASTRO and will pursue additional educational efforts for members before the model's implementation in 2022.
    - Radiation Oncology leaders and staff participate in weekly ASTRO stakeholder calls and attend CMS RO Model educational webinars.
    - ACR is planning to host a webinar in late 2021 in an effort to educate membership on the RO Model and participation. The panelists will include members from the Economics Committees on MACRA and Radiation Oncology.
- The ACR continues to monitor and review Physician-Focused Payment Model (PFPM) proposals submitted to the Physician-Focused Payment Model Technical Advisory Committee (PTAC) and attends the PTAC meetings. Following the release of the PTAC's "Charting Future Directions" paper in March, staff and MACRA Committee leadership remain engaged and curious surrounding future efforts of the PTAC. Staff attended the virtual PTAC meeting in June.
- The ACR continues to monitor the impact of the information blocking provisions of 21st Century Cures Act as it has implications in MACRA.

Payer Relations Committee

- The Payer Relations Committee is closely monitoring contracting issues with major health insurers, particularly as they relate to provider network adequacy and patient access to in network providers. ACR staff and members of the Payer Relations Committee and Commission on Economics are closely following regulations that implement the No Surprises Act. The ACR is focused on ensuring fair physician reimbursement while protecting patients from receiving surprise medical bills. The College provided input to the Biden Administration prior to rulemaking and is in the process of developing comments on the first interim final rule. The second interim final rule, expected to address the independent dispute resolution process, is expected to be published by early September.
- The ACR continues to monitor private payer lung cancer screening coverage policies to ensure that they are updated in accordance with the new United States Preventive Services (USPSTF) guidelines. The most recent USPSTF grade B recommendation expanded annual lung cancer screening with low dose CT by lowering the start age to 50 and smoking pack-year eligibility criteria from 30 pack-year to 20-pack years.

Relative Value Scale Update Committee (RUC)

- For the April 2021 RUC meeting, which was held virtually, the ACR presented an action plan for X-Ray of Knee Arthrography.
- For the upcoming October 2021 RUC meeting which will be held in-person, the ACR will be presenting value and time recommendations for Contrast X-Ray of Knee Joint, 3D Rendering Interpretation and Report, as well as the imaging guidance codes related to the Somatic Nerve Injection code family, pertaining to Ultrasound Guidance and Fluoroscopic Guidance for Needle Placement or Localization.
- The RUC team monitors activities relating to the practice expense methodology, such as changes to clinical labor pricing, the Physician Practice Information Survey (PPIS), the equipment utilization rate, and direct and indirect inputs due to the COVID-19 pandemic. We remain engaged in discussions surrounding telehealth and the revised E/M code valuations and its potential impacts to Radiology. Additionally, we actively collaborate

with the CPT and Data Science Institute (DSI) teams on issues relating to the valuation and impact of innovative technologies (i.e., software algorithms and AI) to Radiology.

Coding

- At the May 2021 AMA CPT Editorial Panel virtual meeting, the ACR submitted a code proposal for Ultrasound Assisted Physical Examination (UAPE) to revise the Evaluation and Management guidelines to reflect use of UAPE. The code proposal was rejected.
- The ACR sponsored or co-sponsored the following code proposals to be presented at the September/October 2021 AMA CPT Editorial Panel meeting. If approved, the Category III codes will be effective on July 1, 2022.
    - Cat III- Quantitative CT Tissue Characterization (Zebra Medical, ACR, RSNA, ARRS, ACC, SCCT).
    - Cat III- Quantitative MRCP (Perspectum, ACR, RSNA, ARRS, AUR).
    - Cat III- Percutaneous AVF Creation (SIR, ACR, AUR, SVS, RSNA, ARRS, RPA).
- The ACR reviewed the 2022 *AMA's CPT Changes: An Insider's View, CPT Assistant*, and *Principles of Coding* to ensure radiology coding guidelines are accurate.
- The ACR continues to publish the bi-monthly electronic coding and reimbursement newsletter (*ACR Radiology Coding Source™*) and the AMA/ACR quarterly coding publication and bi-annual bulletin (*Clinical Examples in Radiology)*.

Medicaid Update

- Staff is working with Dr. Davey to develop a Medicaid Primer for ACR members and young physicians. Given enrollment in Medicaid during the pandemic these services are becoming even more important. The primer will cover background, benefits, coverage, and state waivers.
- On June 15, 2021, The Medicaid and CHIP Payment and Access Commission (MACPAC) released its June 2021 Report to Congress on Medicaid and CHIP, the report covered the following topics: high-cost specialty drugs in the Medicaid program; access to mental health services for those enrolled in Medicaid and the State Children's Health Insurance Program (CHIP) integration of physical and behavioral health care through electronic health records (EHRs); Medicaid's non-emergency transportation (NEMT) benefit; and state strategies for integrating care for people who are dually eligible for Medicaid and Medicare.
- Staff attends the MHPA Quarterly Policy Roundtable web meetings to stay current on legislative and regulatory activities impacting Medicaid. Medicaid Network Chair attended the MHPA Spring Policy Conference. Staff will attend with MHPA Annual Conference in the fall.
- Staff and Medicaid Network leadership meet bi-weekly to discuss Medicaid relevant content. The latest coronavirus relief package provides financial incentives for the states to expand Medicaid coverage. The latest bill provides a two-year, 5% increase in the Medicaid Federal Medical Assistance Percentages (FMAP) to states that expand Medicaid.
- Staff continues to post state and national relevant Medicaid news weekly via Engage.

National Coverage Determination

- On June 15, the ACR, G02Foundation, and STS submitted comments to CMS in response to its National Coverage Analysis (NCA) for Screening for Lung Cancer with Low Dose Computed Tomography (LDCT) (CAG-00439R). Comments were solicited from the ACR

LCS 2.0 steering committee, and the entire membership was encouraged to submit individual comments to CMS. The letter includes recommendations to improve the next iteration of Medicare lung cancer screening coverage requirements. The Joint societies expressed changes to the NCD during an August 5th zoom meeting with the Coverage and Analysis Group. We expect a proposed decision memo by November 18, 2021, at this time we may conduct outreach with CAG to get another call. To view comments on suggested changes to the NCD view the letter here.

- In the 2021 MPFS proposed rule released in July, CMS is proposing to remove the NCD for Positron Emission Tomography (PET) Scans (220.6). CMS believes that allowing local contractor discretion to make a coverage decision for PET scans better serves the needs of the Medicare program and its beneficiaries. This NCD was established in 2000 and indicated broad national non-coverage for non-oncologic indications of PET. This meant that CMS required that every non-oncologic indication for PET must have its own NCD to receive coverage. CMS is soliciting comments on the proposed elimination of the NCD for PET Scans as well as comments recommending other NCDs for CMS to consider for future removal. The Agency requests that commenters include a rationale to support comments.

Local Coverage Determinations (LCDs)

- In March, all seven MACs finalized their LCDs on Facet Joint Interventions for Pain Management. The policy becomes active on April 25, 2021, for most MACs; CGS offered two education sessions on the finalized policy changes on March 12, 2021, and April 14, 2021. Noridian held an educational webinar on coverage indications and coding/billing guidance for this procedure on July 20, 2021. Review the latest coverage and coding articles here.
- ACR CAC Network leadership and staff have worked with the Economics Committee on Nuclear Medicine to chart a path to reimbursement for FDG PET for Infection and Inflammation now that coverage determinations are at the discretion of the local MAC. This is a collaborative effort with SNMMI, and MAC education sessions have been held with WPS, Palmetto, and CGS. A call with Noridian in April was canceled after educational material was provided via email. At present, none of the MACs have issued official guidance on filing claims for PET-CT for the detection of infection. To get an update on these activities view the May 2021 ACR Bulletin article A Unified Approach.
- In May, ACR signed onto SNMMI's request to support their letter to NGS on Myocardial PET Imaging. The letter encourages NGS to update the Medicare payment rate for the myocardial PET codes to appropriately reflect the relative difference in the cost of performing different types of procedures. The content of the letter has been approved by the Economics and Nuclear Medicine and Molecular Imaging Commissions, the CAC Network leadership, ACR Coding, and RUC Advisors. The following organizations are partnering on this outreach effort: SNMMI, ASNC, ACC, and ACR. Parallel to this effort a template letter has been created and circulated to our designated CAC representatives in the NGS MAC jurisdiction. Learn more here.
- On June 8, ACR convened its CAC Network representatives and alternates virtually under the leadership of Dr. Sammy Chu and Dr. Laeton Pang. The CAC leadership spent a significant amount of time reviewing local coverage process changes and the evolving role of the CAC representative. Meeting participants spent time viewing critical elements of a local coverage determination policy and 2020-2021 CAC activities. There is consensus among the network that CMS contractors are minimizing the role of the CAC by contributing to a lack of transparency in the selection of clinical topics and subject matter

experts before the release of the draft LCD policy to the public. Many of the LCDs and CAC meetings have crossed multiple MAC jurisdictions, leading to more national coverage discussions on local and regional matters. Meeting highlights are accessible here.

- Since June all seven MACs have released their draft LCD policies on Epidural Procedures for Pain Management. Many of the policies have a comment deadline from July through September. The multi-pain workgroup drafted a sign-on letter and physician template for CAC reps to share with their MAC. It was determined ACR would not sign on to the MPW joint society comment letter request. Draft LCD documents and local coverage articles are posted to the Medicare Coverage Database and accessible here. Each MAC is hosting open meetings to discuss the content of the proposed LCD.
- CAC network updates and meeting notices are submitted weekly via the Engage forum.

Areas of Concern:

Key areas of concern for the ACR, Board of Chancellors or profession moving forward include:

- Continue to monitor and work to mitigate the impact to radiology due to the E/M policy and proposed clinical labor update.
- Work with other ACR commissions, such as Q&S to help educate members on updates to the Quality Payment Program, such as the MVP Program.
- Continue to work with CMS on implementation of Clinical Decision Support as mandated by PAMA.
- Continue to advocate for the most appropriate valuation of imaging services within the Medicare Physician Fee Schedule and the Hospital Outpatient Prospective Payment System as fee-for-service reimbursement will continue to remain an important part of payment policy for radiology.
- Continue to monitor site neutral payment policy discussions and proposals by the Medicare Payment Advisory Commission (MedPAC) and in the HOPPS and MPFS regulations.
- Monitor closely the impacts of COVID-19 on radiology practices, in particular legislative and regulatory allowances provided during the emergency declaration.

Member Value:

The Commission on Economics provides value to ACR membership in its efforts to secure appropriate reimbursement and appropriate patient access for imaging services. Proper implementation of coverage of lung cancer screening is one example of such value. CMS implementation of CDS, as well as provisions of MACRA, are vitally important to the future of radiology. The Commission is working tirelessly to ensure that the best interests of our members and their patients are represented.

Commission on General, Small, Emergency and/or Rural Practice (GSER)

Chair: Robert S. Pyatt, Jr., MD, FACR
Vice Chair: Eric Friedberg, MD, FACR

Commission Update:
The GSER Commission continues to experience significant growth and activity.

- GSER Network Committee –
  - VA Radiology Subcommittee:
    - Update at Annual Meeting on VA lung screening project.
    - Webpage in development to highlight goals, support and publish articles by VA physicians.
    - Outreach to begin using VA Rocks forum on Engage and Radiology Chicks (@RadChicks) to connect with FACR-eligible VA members and review CME discount opportunities.
  - **Military Radiology Subcommittee:**
    - Supporting pathway to FACR with updates to the Military Nomination Criteria assessment rubric.
    - Mentorship program to support military to civilian transition.
    - Locate leadership opportunities to serve in ACR committees and commissions.
    - Update on Women's Health Initiative.
  - **Rural Practice and CAH Subcommittee:**
    - Welcomed new chair: Anand Prabhakar, MD.
    - Welcomed new members: Arabinda Choudhary, MBBS; Joseph Polino Jr, MD; Carlin Ridpath, MD; Shahein Tajmir, MD.
    - Thanked Dr. Ivan DeQuesada for his service as chair and Dr. Kelly Biggs for his participation as a member of the subcommittee.
    - Developed goals for 2021-2022.
  - **Teleradiology Subcommittee:**
    - Developed goals for 2021-2022.
    - Planned and confirmed a lecture at RSNA2021: Dr. Hanna will give a lecture entitled "Impact of Teleradiology in the Modern Era".
    - Worked with Radiology Today on an article called "The Future of Teleradiology"
    - Aligned ourselves with the "Afterhours Radiology Committee" a joint project under the HR and GSER commissions
    - Have had initial discussions with internal and external stakeholders on survey-based projects we may pursue, and also looking at national datasets that we can leverage to examine some of these important issues for our constituency
  - **Puerto Rico Work Group:** Developed goals for 2021-2022.

- **Committee on Economics** – Dr. Greg Nicola, Chair of the Commission on Economics, presented during the committee's first meeting of the new cycle to discuss hot topics in radiology and expectations of the committee. The Committee held a discussion on proposed changes in the Medicare Physician Fee Schedule and Hospital Outpatient

Payment System proposed rules, as well as the Task Force that was assembled in response to Resolution 47 that the Committee put forward at ACR 2020. Topic areas that the committee plans on covering this year include artificial intelligence, evaluation and management coding, and practice modeling.

- **Committee on Emergency Radiology –** Current actions of the committee include:
  - Exploration of MCI White Paper activation.
  - Practice management guidance - Staffing and scheduling.
  - Exploration of Afterhours Workforce Survey - with HR Commission.

For the coming year, the committee plans to schedule 5-6 meetings with focused topics to include Economics, Quality, Leadership, Hot Topics, Teleradiology and Critical Access/Rural Practice.

- **Committee on Practice Parameters**:

Two GSER co-sponsored documents were adopted at ACR 2021.

1. ACR-SIR-SPR Practice Parameter on Informed Consent for Image-Guided Procedures. **Resolution 7, Reference Committee I**
2. ACR-SAR-SPR Practice Parameter for the Performance of Abdominal Radiography. **Resolution 39, Reference Committee IV**

2022 cycle ACR GSER sponsored/co-sponsored parameters:

1. ACR Practice Parameter for CME – Chair: Derrick Siebert, MD *Ready for field Review*
2. ACR-SPR-STR Practice Parameter for the Performance of Chest Radiography (Pediatric and Thoracic Co-sponsored) – Chair: Subba Digumarthy, MD *In the revision process*
3. ACR-SPR-STR Practice Parameter for the Performance of Portable (Mobile Unit) Chest Radiography (Pediatric and Thoracic Co-sponsored) – Chair: Subba Digumarthy, MD *In the revision process*.
4. ACR Practice Parameter on the Physician Expert Witness in Radiology and Radiation Oncology (Radiation Oncology Co-sponsored) – Chair: Candice Johnstone, MD *In the revision process*.
5. ACR Practice Parameter for the Performance of Hysterosalpingography (Abdominal co-sponsored) – Chaired: Olga Brook, MD *In the revision process*.
6. ACR Practice Parameter for the Performance of Modified Barium Swallow (Abdominal Lead) – Chair: Mary Turner, MD *In the revision process*.

- **Committee on Quality & Safety –** The committee has developed three surveys (patient, radiologist, referring clinician) for their Act 112 project. The test sites are getting IRB approvals in order to distribute these surveys at their institutions. The committee has also developed a metric for DXA scans, which is being reviewed by the ACR National Radiology Data Registry for implementation in the General Radiology Improvement Database.

Areas of Concern:

- **Recruitment** – moderately large, as well as smaller and rural practices, are having trouble replacing retiring radiologists, most of whom have broad DR and IR skills and are poorly replaced by subspecialist radiologists with weak IR skills, or who have little interest in performing basic IR procedures, even those IR procedures that were previous "basic IR skills" as part of their Fellowship training in years past (Example, Body Imaging Fellows

who no longer learn how to perform a paracentesis, or CT guided liver biopsy). There is a concern that there is way too much sub-specialization, without linked IR procedural skills, and this is a detriment to necessary patient care across the population by radiologists. There is a strong need for more radiologists with skills across more than one silo, inclusive of basic IR related skills.

Member Value:

The GSER Commission provides value to the membership by identifying and addressing issues affecting the practice of radiology in general, small, emergency and/or rural practice settings. The commission is also providing value by engaging with constituencies such as the military and VA in order to ensure their perspective is provided in the work of the College.

Commission on Government Relations

Chair: Howard Fleishon, MD, FACR

Commission Update:

E/M

In order to retain the 3.75% increase to the conversion factor (CF) contained in the federal fiscal year (FY) 2021 Medicare Physician Fee Schedule through 2023, the American College of Radiology® (ACR®) led an effort to send an organizational sign-on letter urging congressional leadership to through FY 2023. The letter was signed by 109 organizations representing more than one million providers nationwide.

Specifically, the letter urges Congress and the Administration to make a critical investment in the nation's health care delivery system by extending the 3.75% increase to the CF through at least calendar years 2022 and 2023. Maintaining this level of funding will ensure physicians and other health care providers can continue to provide high-quality care focused on engaging patients, increasing the delivery of integrated, team-based care, expanding chronic disease management, and reducing hospital admission/readmission rates for beneficiaries residing in the community as well as those in long-term nursing facilities.

The ACR will continue to work with these organizations to explore more opportunities to educate Congress about the need to extend the CF increase and protect access to timely healthcare.

"Surprise Billing" Rules

The U.S. Departments of Health and Human Services (HHS), Labor and Treasury, along with the U.S. Office of Personnel Management, released the first of several interim final rules with comment (IFC) July 1 to implement the No Surprises Act. The act was part of the Consolidated Appropriations Act, 2021 and is scheduled to take effect Jan. 1, 2022. This first rule addresses requirements related to patient cost sharing for emergency services, air ambulance services provided by out-of-network providers and non-emergency services provided by out-of-network providers at in-network facilities in certain circumstances.

In addition, this IFC provides detailed information about the methodology for calculating the "qualifying payment amount" (QPA). In recent comments to HHS Secretary Becerra, the American College of Radiology® (ACR®) provided input about calculation of the QPA to ensure fairness to healthcare providers. The ACR is disappointed with some aspects of the QPA calculation methodology, including the treatment of each provider contract equally regardless of the practice size and market share of the providers when determining the median rate. For example, the contracted rate of a practice with 25 radiologists serving 80% of the market is treated the same as contracts with three radiologists serving 5% of the market. The rule also indicates that incentive-based payments including bonuses and risk sharing is excluded from calculation of median rates.

The IFC does not address the ACR-supported independent dispute resolution process designed to allow providers and insurers an avenue to resolve disputes about out-of-network rates. However, this process is mandated by law and will be addressed in a future rule.

If ACR concerns are not appropriately addressed by the jurisdictional agencies, the ACR will explore additional legislative action to correct those concerns.

Appropriate Use Criteria (AUC) Implementation

In its 2022 Medicare Physician Fee Schedule (MPFS) proposed rule, the Centers for Medicare and Medicaid Services (CMS) touted the appropriate use criteria (AUC) program mandated by the Protecting Access to Medicare Act of 2014 (PAMA) as a valuable tool "to guard against overutilization, fraud, waste, or abuse." CMS proposes that the program, designed to be an educational tool for providers who order advanced diagnostic imaging services, be fully implemented on Jan. 1, 2023, or the January 1 following the declared end of the COVID-19 public health emergency (PHE).

PAMA included a Jan. 1, 2017, start date for the AUC program. However, CMS had difficulty developing claims processing edits that would accurately flag claims required to include AUC consultation information. In addition, the COVID-19 PHE caused delays in provider implementation of CDSM protocols. The 2022 proposed rule addresses the outstanding claims processing issues and would allow providers to continue to use the "significant hardship exception" for delays due to the PHE once the program enters the penalty phase.

The program is currently in an "educational and operations testing period" that began Jan. 1, 2020, through the end of 2022 due to the PHE.

State Scope of Practice (SOP)

Non-physician provider societies, specifically for Advanced Practice RNs (APRN) and Physician Assistants (PAs), have ramped up their fight to increase their members' SOP and gain independent practice – particularly at the state level. State and national agencies have encouraged use of these physician extenders — especially during the COVID-19 public health emergency.

To ensure the preservation of radiologists' scope of practice, the American College of Radiology Association® (ACRA®) has established the Scope of Practice (SOP) Fund to safeguard patients and patient access to radiologist expertise by fighting state and federal non-physician SOP expansion legislation. The new SOP fund, with its initial $225,000 in funding, will be used in conjunction with state radiological societies to proactively educate lawmakers and counter future scope threats to patient safety.

The new fund will bolster ACR national and state chapter involvement in scope-of-practice legislative, regulatory and legal activities. As part of this strategy, funds will be used to partner with other physician specialty or state medical societies to amplify the message of patient safety first.

In addition to establishing the SOP Fund, the ACR has also joined the American Medical Association's (AMA) Scope of Practice Partnership as a member of the SOPP steering committee. Joining the SOPP should demonstrate to our members the high level of commitment ACR has regarding the scope of practice issue.

Areas of Concern:
Key areas of concern for the ACR, Board of Chancellors or profession moving forward include (please list in the order of importance):

Due to the slim majorities in Congress leading to a more active regulatory agenda, as well as the potential for more presidential executive orders, the ACR Government Relations Commission and GR staff will need to increase its monitoring of such actions in order to thwart or minimize any adverse impact on the practice of radiology.

Member Value:
ACR members and their patients will benefit from ACR's efforts regarding the subjects above as well as its continued communication with Congress and the corresponding healthcare-related federal agencies.

ACR Commission on Human Resources

Chair: Eric Rubin, MD, FACR

Commission Update:

The Commission has been hard at work in the development of a rebooted HR Workforce Survey which was put on hold in 2020 due to the COVID-19 pandemic. The rebooted 2021 Survey, in the final stages of drafting, will focus on hiring trends for radiologists, radiation oncologists and other Allied Health professionals.

Workgroup Updates:

- With the unanimous consent of HR Commission Members, Dr. Rubin, along with a group of member leaders from outside the HR Commission, developed a survey to understand attitudes and incidence around Non-physician Radiology Providers. It was decided by ACR leadership to place this survey on hold until the formation of a Task Force on Radiology Extenders.

Areas of Concern:

The HR Commission is concerned that the landscape around Radiology Extenders is poorly understood.

Member Value:

The Commission is committed to developing data-driven tools and dialogue around the staffing and training of radiologists and Allied Health professionals.

Commission on Informatics and the ACR Data Science Institute

Chair: Christoph Wald, MD, PhD, MBA, FACR

Commission Update:

- The Informatics Commission held their third quarterly meeting of 2021 on June 23rd. Commission members provided updates on their current projects and portfolios within the commission, some of which are highlighted below.
- The Informatics E-Learning Hub was created to highlight bite-sized videos and content from summit speakers and commission members on a variety of topics including the basics of AI, bringing AI to practice, data sharing, and more. This educational resource is available to the public and will be updated with new content on a quarterly basis. Lead by Dr.Chen, a communication campaign is under way which messages individual content modules to members via email and SM campaign.
- ACR Informatics Commission leaders and ACR Government Relations staff held a series of meetings with the U.S. Department of Health and Human Services (HHS) Office of the National Coordinator for Health IT (ONC) regarding the agency's Information Blocking regulations and the exchange of diagnostic images. The meetings were a continuation of ACR's ongoing efforts in these areas.
- A joint paper has been drafted by ACR and RSNA leaders to outline key issues to address in order to bring about Image Sharing; this includes a call to action for image sharing vendors.
- A Cybersecurity working group is being constituted, targeting creation of member resources for Q4/Cal2021

DATA SCIENCE INSTITUTE®
AMERICAN COLLEGE OF RADIOLOGY

ACR Data Science Institute Activities

- Commission members Bibb Allen and Howard Chen co-chaired the Virtual 2021 ACR Data Science Summit held on June 16th. The content focused on "AI in Clinical Practice: Choosing the Right Tools for your Practice and Patients". The virtual event was well attended with over 140 registrants.
- The DSI and AAO (American Academy of Ophthalmology) have signed an MOU in a joint effort to add ophthalmology use cases for Artificial Intelligence (AI) to AI-LAB. The goal of this effort will be to bring together the infrastructure developed by the ACR Data Science Institute (DSI) with content created by the AAO to extend the current version of AI-LAB to include AI use cases for ophthalmology.
- The DSI has signed an MOU with The PEW Charitable Trust to collaborate on Pew's research project on the landscape of artificial intelligence-enabled imaging tools (project).
- The DSI in collaboration with the CRI submitted two NIH grant applications related to AI. The first was AIM-AHEAD, a program to establish mutually beneficial and coordinated

partnerships to increase the participation and representation of researchers and communities currently underrepresented in the development of AI/ML models and enhance the capabilities of this emerging technology. The second was BRIDGE2AI, a program designed to set the stage for widespread adoption of artificial intelligence (AI) that tackles complex biomedical challenges. Both grants focus on the ACRConnect\AI-LAB\DART infrastructure.

- A new IT commission radiologist member was recruited (Dr.Andy Schemmel) who will work with ACR DSI staff to enhance ACR Connect capability of interoperability/data exchange with electronic health records.

Areas of Concern:
No areas of concern at this time.

Member Value:
The Informatics Commission activities help heighten radiology professionals' role as an integral member of the healthcare team and extends member value from being the experts in imaging interpretation and image guided therapies to experts in gathering and integrating comprehensive diagnostic information into clinical care.

IT commission adds value to ACR members and patients by educating them about imaging informatics and in leading Imaging IT innovation/infrastructure development in areas which cannot typically be accomplished by individual members alone. The American College of Radiology Data Science Institute® is collaborating with radiology professionals, industry leaders, government agencies, patients, and other stakeholders to facilitate the development and implementation of artificial intelligence (AI) applications that will help radiology professionals provide improved medical care.

Commission on International Relations

Chair: Howard B. Fleishon, MD, FACR, MMM

Commission Update:

- The ACRF International Outreach Committee has worked with Imaging the World (ITW) and Rotary Clubs to fund new portable sonography units capable of sending sine-loops to nearby regional hospitals in Uganda. The project builds on over 5 years worth of progress from ITW which has trained and equipped rural health clinics. Uganda has one of the highest maternal death rates in the world and the ability to use ultrasound early in the pregnancy has led to improvements in maternal and prenatal care and reduced deaths as a result.
- The ACRF International Outreach Committee has made changes to the ACRF Global Humanitarian Award expanding definitions to include providing access to quality radiological care in developed nations that lack access in areas within those countries. In addition, applicants seeking to improve health equity may now use that criteria on their applications.
- The ACRF International Outreach Committee has worked with Rotary Clubs International to submit a 10-page concept piece to become a finalist in a $2 million grant. The project would establish up to 25 new CR with open-source PACS and ultrasound units for clinics in low to middle income countries. The concept pieces are being reviewed and the top six will be able to submit for the final $2 million dollar grant. The grant will be awarded in the spring of 2022 and will be spread over 3-5 years.
- The Goldberg Reeder Travel Grant program had 3 recipients awarded this summer to participate in a minimum of one month of service in a middle to low-income country with the goal of improving radiological care in those countries. Since 2008, the ACRF Goldberg Travel Grant has funded nearly 50 radiology residents to travel abroad and assist in LMICs.
- The Commission on International Relations submitted an application to become a consultant of the UN ECOSOC (Economic and Social Council). The initial application had some compliance issues. The application will be corrected and resubmitted this summer. As described on their website, ECOSOC brings people and issues together to promote collective action for a sustainable world. This would allow the ACR and its Foundation to attend UN meetings and promote radiological issues.

Areas of Concern:

Key areas of concern for the ACR, BOC, or profession moving forward include (please list in the order of importance):

- COVID-19 infection and vaccination rates vary considerably throughout the world. This has stymied travel for many US physicians that are volunteering their services abroad.
- The potential use of AI in low to middle income countries that lack the ability to quickly diagnose patients has picked up some steam. The ACR will continue to monitor the issue.

Member Value:
The ACR, in its efforts to fulfill its laudable goal of ACR members being universally acknowledged as leaders in the delivery and advancement of quality health care must engage with organizations outside the US to both learn and educate on the importance of quality radiological care.

Commission for Interventional Radiology & Cardiovascular Imaging

Alan H. Matsumoto, M.D., FACR, FSIR, FAHA, Chair

Commission Update:

I. The Committee on Credentialing and Privileging has established a library of templates and widely communicated the availability of this resource via ACR media networks. ACR marketing continues to promote the library on various ACR platforms; most recently ACR Smart Brief.

II. An IR Commission proposal for an ACR survey that was focused on exclusive contracts and how they may be adversely influencing the practice of independent IRs was accepted. The intent of the survey was to provide information about the factors, general feelings and attitudes of both DRs and IRs about this topic, given that cardiologists, vascular surgeons and interventional nephrologists may have the same privileges being requested by independent IRs. The writing group, with Drs. Matsumoto and Azene as the leads with Jo Tarrant, have analyzed the data, finalized the paper and submitted it to *JACR* the second week of July 2021.

III. The IR Commission, GSER and SIR leadership have participated in several conference calls to develop and GSER/IR Workforce Task Force to develop a better understanding of how best to address concerns about the recruitment and retention of interventional radiologists in smaller communities/practices to provide access for patients and these communities to the much needed IR services. The task force, Co-chaired by Drs. C. Everett (ACR) and L. Findeiss (SIR) presented to the BOC in in April and the group has been approved to move forward with the work of the task force.

IV. An IR Research Committee to foster collaborative research efforts in IR leading to the development and conduct of research and/or clinical trials targeted at high priority topics and issues within IR/IO. This working group will be under the Commission on Research and be a Committee within the IR Commission and have representation on the IR Commission. Dr. Jeremy Durack will serve as the Chair of this Committee.

   a. The goal of the IR Research Committee has been to promote impactful trials in IR and to find ways to collaborate with the ACR and CRI resources.
   b. The IR Research Committee submitted 2 IR FCRI grant proposal, which were unfunded.
   c. Suggested OFIs for the ACR
      i. Develop an in-house capability for the ACR to provide statistical support for research projects or have an entity with whom the ACR has partnered for these resources to support research proposals
      ii. Provide a mechanism to provide feedback on unfunded grant proposals to enhance likelihood for future success

V. The IR Commission continues to work as part of an FDA Advisory Group, Paclitaxel Coalition, of 8 societies/organizations and finalized talking points around the FDA warning about the potential for an increase in long-term mortality with the use of paclitaxel coated PTA angioplasty balloons and stents.
    a. The IR Commission (Dr. Matsumoto) continues to be involved with the FDA MDEpiNET Re-Assessment of Peripheral Interventional Devices (RAPID) group, which continues to meet at least 2x/month.
    b. The ACR will be working with the SIR and SVS to discuss having a harmonized database and registry tool (Vascular Quality Initiative, VIRTEX and NCDR) for any FDA-approved trial involving peripheral arterial disease.
    c. The Coalition generated a Mission Statement and Goals around the topic of Peripheral Arterial Disease (PAD) and its membership would like to serve as liaisons to their respective Societies/Organizations to create a singular voice when it comes to issues (FDA, Legislative, Education, Guidelines, White Papers, Payers, etc.) related to PAD.
    d. Group to work on developing standardized procedure note for PVI, carotid stenting, EVAR, TEVAR, etc that could be a standard to be used by all providers, all specialties, all EMR's, etc.

VI. The Commission has finalized its Mission Statement, Vision and Organizational chart to provide better structure and goals for the Commission moving forward and will be a living document and updated on an annual basis.

VII. The Commission has incorporated two fellowship-trained Cardiovascular Radiologists and an Interventional Neuroradiologist to the Commission.

VIII. The Commission provided recommendations to ACR legal for IR members to the ACR Ethics Committee (Kari Nelson, MD, Sharon Kwan, MD, Claire Kaufman, MD and Teresa Caridi, MD) and to Dr. Rubin for a representative to the ARRT Cardiac-Interventional Practice Analysis Committee and the Vascular Interventional Practice Analysis Committee, who was accepted to serve in this role (Dr. Kari Nelson).

IX. The Commission was invited to provide comment on the AHRQ Interventional Treatments for Acute and Chronic Pain: Systematic in May 2021. The Commission provided comment and endorsed the document.

X. The Commission provided comments directly to SCAI regarding the Competencies for Endovascular Specialists Providing Care for Patients with Critical Limb Threatening Ischemia in March 2021. An updated document was provided to the Commission in June 2021 for review and final endorsement. The Commission recommended endorsement.

XI. The Commission nominated Dr. J Fritz Angle, FACR, to serve as a non-voting member of an NRC Working group on radioembolization agents. He is currently undergoing the governmental clearance process. The hope, is after a trial period as a non-voting member of this group, he will be elevated into a voting position.

XII. The Commission Chair is working the CSC and BOC to draft wording for Resolutions 2f and 25 to present to the Council in April of 2022.

Areas of Concerns:

- Some independent IRs are struggling with garnering hospital privileges to admit patients and perform IR procedures where Diagnostic groups hold exclusive contracts, while vascular surgeons, cardiologists and nephrologists can obtain these same privileges from which the IRs are being excluded. The ACR and SIR would like to have a better understanding of the factors and attitudes that are influencing this growing dynamic and how the ACR might be able to positively contribute to this conversation for its membership.
- There is a need for IR expertise and services for practices in less-suburban and more rural environments. However, call coverage needs and insufficient volume of procedures to justify the costs of more than one IR are creating financial and patient care access issues for many practices.
- The Commission believes that increasing the diversity in IR is critical for the success of this new specialty and will be looking at ways to implement programs to positively impact the diversity of the specialty of IR, particularly looking for ways to start recruitment at the level of medical students and will likely try to partner with the SIR in this effort (still a work-in-progress).
- With the increasing awareness of the U.S. Opioid epidemic, the IR Commission is looking for ways to be a part of the national conversion regarding the commitment of IR to increase the awareness of and help address this national health care problem using image-guided therapies for pain syndromes in lieu of opioid use. IR is still trying to develop a footprint and seat at the table in these discussions. Dr. John Prologo, an IR at Emory, has participated in and provided feedback on a FDA-related document specific to the opioid epidemic.
- The Commission worked with the Commission on Practice Parameters and Technical Standards and the ACR staff to address the use of verbiage or Tables/Figures from other published documents without full referencing or obtaining copyright releases on a Practice Parameter and Technical Standards document.

Member Value:

1. The library of Core Privileging templates for image guided procedures will serve as a resource for ACR members.
2. The proposed exclusive contracts survey and subsequent manuscript will provide the ACR leadership and membership better insight into this perceived conundrum and provide context to be considered when these situations arise.
3. The IR Commission, GSER and SIR Taskforce will provide a variety of options for the recruitment and retention of IRs and improving patient access to IR services, especially for more rural and smaller communities.
4. Growing a strategic relationship with the SIR will help to improve communications between the ACR and SIR and amplify and optimize efforts in support of Interventional Radiologist, while at the same time reducing duplication of resources and inadvertent miscommunications.
5. The provision of guidance and advice for the FDA on the topic Registries, Devices, and reporting fields on clinical trials as a member of the multispecialty "Coalition" puts the ACR in a better position of influence in the space of PAD.

6. Having ACR members on the ABR IR Advisory Panel and Board of Trustees will amplify the over-all voice for all ACR membership with the ABR.
7. Having an ACR member on an NRC committee provides the ACR a voice for the medical uses of isotopes and hopefully facilitate the role of this individual to a voting member of the group.
8. Having a Research subcommittee as part of the IR Commission in partnership with the GRER and SIR/SIO to develop strategies to drive innovation and clinical trials in IR and help to grow relationships between the ACR and SIR/SIO.
9. Growing diversity in IR will also help expand the diversity of DR and help to better serve the growing diversity of our patients.
10. Putting Interventional and Diagnostic Radiologists who perform pain management procedures into the discussion of managing pain without the use of opioids and will elevate the stature of Radiologists in this important medical conundrum.
11. Adding Radiologists to the Commission whose primary focus is Cardiovascular Radiology and Interventional Neuroradiology will provide these subspecialists better representation in the ACR.

October 2021 Update

Commission on Leadership & Practice Development | Radiology Leadership Institute

Richard Duszak, Jr., MD, FACR | Frank J. Lexa, MD, MBA, FACR

Commission Update:

- **Commission Reorganization.** Since their inception and co-founding, the Commission on Leadership and Practice Development and the Radiology Leadership Institute (RLI) have been largely synonymous, and activities have focused much more on leadership than practice development. Deliberate planning is underway to building upon the success of the RLI by maintaining and growing its rich educational offerings while simultaneously expanding non-educational initiatives focusing on practice development. As Dr. Richard Duszak has assumed the role of chair of the commission, Dr. Frank Lexa **has graciously agreed to continue to serve as chief medical officer of the RLI.**

- **Commission Activities Planning.** Preparing to support the ACR's new strategic plan, the commission has begun a variety of brainstorming activities about future initiatives and offerings to provide value to the ACR and its members. Initiatives being currently discussed include:

    - **Development of a Practice Leaders Network**. Through the Society of Chairs in Academic Radiology Departments (SCARD), robust resources exist for academic chair networking, but no similar formal structure exists for non-academic practice leaders. The Radiology Business Management Association (RBMA) has for many years successfully built and supported an online community for practice leaders to collaborate and share. Commission members believe that opportunities exist for a similar non-academic physician practice leader forum but agreed that this should complement (rather than compete with) existing programming. Discussions are underway about potentially branding this as a long-term networking opportunity for participants in the Practice Leaders Forum (see below).
    - **ACR Volunteer Leader Coaching and Leadership Development**. Discussions with BOC members have indicated a possible need for and support of dedicated leadership training for ACR volunteer leaders (e.g., BOC and CSC members, selected committee members). A pilot program focusing on economics commission chairs will soon be launched. Given the heterogeneity in leadership training and coaching opportunities available to volunteer leaders through their employers, discussions are underway about creating a scalable leadership training toolkit for current and rising ACR volunteer leaders.

Radiology Leadership Institute Update:

- **ACR-RBMA Practice Leaders Forum**. In 2022, the Forum will take place at the Waldorf Astoria in Orlando, FL, on January 21- 23, 2022. Chaired by Jonathan Berlin, MD, MBA, FACR, and Keith Chew, MHA, CMPE, FRBMA, the program is shaping up to be as engaging as ever. A few highlighted sessions include: Decisions that Matter: The Past Informing the Future (Keynote) - Ezequiel Silva, MD, FACR; The Impact of the 2022 MPFS &MIPS/ACOs – Barbara Rubel, MBA,

FRBMA, Ryan Lee, MD, MBA, and CMS Representative; COVID Impact and Implications for Practice Management and Health Policy – Elizabeth Rula, PhD, Ajay Malhotra, MD, and Jonathan Berlin, MD; AI: Lessons Learned and to Be Learned – Juan Jimenez, MD, Ryan Lee, MD, MBA, Kelly Oppe, and Eric Richardson. Additionally, in an effort to continue the learning beyond the three days of in-person sessions, the Practice Leaders Forum planning committee, along with ACR and RBMA staff, are in the process of developing an online community for continued discussions as well as considering adding a few webinars that will take place throughout 2022 following the Forum. If successful, we will consider making it a permanent addition to the event in the future.

- **Kickstart Your Career Workshop.** Registration is open for the November 3, 2021 virtual Kickstart Your Career workshop that will be held from 5:30-7:30 pm ET/2:30-4:30 pm PT. Similar to the fall and spring virtual formats, this workshop will offer a variety of pre-recorded lectures (made available a week in advance) and a live webinar that consists of interactive small-group exercises, mock interview simulations and a popular interactive component titled "Dealing with Difficult People." Feedback from both mentors and mentees about the Mentorship Program which was launched during the fall 2020 workshop has been very positive and will continue to be offered with this workshop. The RLI continues to invite chapters to offer "sampler workshops" of the Kickstart workshop at their local chapter meetings, citing both formats utilized by the Michigan and California chapters as examples of how Kickstart can fit their needs.

- **RLI Leadership Essentials Program (LE).** Since the program's inception in 2018, over 800 residents and fellows have participated. Current program chairs, Ann Jay, MD, and Ryan Peterson, MD, along with a Leadership Essentials Working Group, utilized survey data to update the program for 2021. The 2021 program, which runs from September – December 2021, will include the following faculty and topics: Rookie Leadership – Richard Duszak, MD, FACR, FSIR, FRBMA; Effective Communications That Drive Success – Jamlik-Omari Johnson, MD, FASER; Social and Emotional Intelligence: Their Role in Successful Workplace Relationships – Jessica B. Robbins, MD; Reframing Work-Life Integration – Jennifer W. Uyeda, MD; Mentorship: Why It's Important and How to Make the Most of It – Jean Jeudy, MD; Personal Finance: Why It Matters for Leadership at All Stages of Your Career – Kurt A. Schoppe, MD; Optimizing Your Professional Brand with Social Media – Darel E. Heitkamp, MD and Making Yourself Indispensable – Harprit Bedi, MD

- **2020-2021 RLI Power Hour Webinar Series**. Bob Pyatt, MD and Jennifer Nathan, MD have successfully co-chaired the 2020-2021 series and are well into the planning and executing of the 2021-2022 webinar series. Recent topics included Hospital Mergers & Consolidating/Merging Radiology Practices and How We Started in Quality Improvement: Individual Stories (developed in collaboration with the Q&S team); with Pearls of Leadership taking place in December. Additionally, Governance Structures for Private Practices, International Outreach and Population Health Management are topics being considered for 2022. Last year's 2020-2021 Power Hour webinar series received 842 unique registrants, a 19% increase over the previous year. As the series continues to collaborate with other internal and external partners to address content needed and requested by members, we expect to see this number continue to increase again in the coming year.

- **RLI Leadership Lectures @ AIRP Courses.** Since its inception, the RLI has had a presence at the AIRP resident courses providing crucial leadership training that is not covered in the

residents' medical school and ABR curriculums. As a result of the pandemic, the AIRP courses were moved to a virtual environment giving RLI an opportunity to bring leadership training to them in the form of pre-recorded lectures. These recorded lectures have allowed RLI to reach more of the AIRP residents—averaging 72% of each course. The RLI plans to continue to provide pre-recorded leadership lectures to AIPR residents for as long as AIRP courses remain in a virtual setting.

- **RLI Resident Milestones Program: Economics and the Physician's Role in the Health Care System**. This resident-focused program started its 7th year in September 2021. The program is chaired by Harprit Bedi, MD, and Ryan Lee, MD, MBA, and the current 2021-2022 program faculty include Kurt Schoppe, MD; Ryan Lee, MD, MBA; William Mehan, MD, MBA; Colin Segovis, MD and Melissa Chen, MD. As of this date, 26 residency programs will be participating. Please take a moment to read the August Bulletin article called Reaching Milestones for a program overview.

- **Maximize Your Influence and Impact**. Launched in 2017, this cohort-based program is designed to help people in their first leadership role or who aspire to a leadership position, leverage the role for maximum impact. The program is organized into three modules: The Hospital Board Room, Stewarding the Department and Influencing Change at the Hospital Level and, each module is comprised of four topics (view Module Topic Descriptions.) The 2021-2022 course kicked off in October 2021, and faculty include program chair, Geoffrey D. Rubin, MD, MBA, FACR; Jocelyn Chertoff, MD, FACR; Judy Yee, MD, FACR and Rasu B. Shrestha, MD, MBA.

- **RLI Summit**. The 2021 Summit was held September 10-11, 2021, as a two-day virtual program. The program focused on Ecosystems, with both breakouts and case study sessions to help participants apply important concepts. Babson faculty member Liam Fahey, PhD lead the plenary session and collaborated with RLI faculty teams who facilitated the case study sessions. Case study faculty teams were Lawrence R Muroff, MD, FACR and Toyin Idowu, MD for private practice and Geoff D. Rubin, MD, MBA, FACR and Melissa Davis, MD, MBA for academic. Once again, several ACR Chapters awarded scholarships for the virtual event. In addition, a free-of-charge virtual Resident and Young Physician Leadership pre-conference program was held on Thursday, September 9th from 7 – 9:15 pm ET. Plans are underway for the 2022 RLI Summit to be held, in person, at Babson College, September 9-11, 2022.

- **RLI *Taking the Lead* Podcast**. Hosted by Geoff Rubin, MD, MBA, FACR, the podcast series explores the unique career journeys of radiology's most influential leaders to provide practical insight into how to structure a career in leadership and find success across a spectrum of clinical environments and organizations. The *Taking the Lead* podcast will celebrate its three-year anniversary this fall and will release its 39th episode in October 2021.

- **ISR/RLI Leadership Content Collaboration.** The RLI is collaborating with the ISR to create a non-clinical, leadership-focused program for ISR members called *Being an Effective Leader – Core Principles for Success*. The focus will be on foundational leadership principles and skills that the 21st century radiologist will need to succeed regardless of where they live and work. The program will consist of three asynchronous modules: Leading Yourself, Leading Teams and Leading Change and a live, interactive workshop designed for regionally targeted participant groups, is scheduled for October 19, 2021.

- **RLI/SCARD Collaboration Opportunities**. The RLI is looking for opportunities to collaborate with SCARD to identify and potentially develop additional mid-career focused content for the RLI programming portfolio.

- **The RLI Celebrates a Decade of Leadership in 2022**. Celebrations, donor and participant recognition, special educational programs and other events are being planned to commemorate RLI's 10th anniversary. Festivities officially kick-off with the first article in a four-part series that will appear in the ACR Bulletin in November.

Commission on Medical Physics

Chair: Mahadevappa Mahesh, MS, PhD, FACR

Commission Update:

Activities and achievements:

- The annual face-to-face commission meeting held at AAPM was replaced by a Zoom conference call on August 12, 2021.
- The commission sponsored a WonderRoom get-together for medical physics graduate students and residents in conjunction with the 2021 AAPM virtual annual meeting.
- The 2021 Richard L. Morin Fellows in Medical Physics, Jeremiah Sanders, PhD and Krystal Kirby, PhD, will be invited to attend the ACR Annual meeting in 2022.
- The 2020 Richard L. Morin Fellows in Medical Physics, Crystal Green, PhD and Marthony Robins, PhD, will also be invited to attend the ACR Annual meeting in 2022.

Areas of Concern:

Key areas of concern for the ACR, Board of Chancellors or profession moving forward are still:

- Engaging incoming generation(s) of medical physicists
- Retaining existing ACR members and persuading mid-career medical physicists to join through involvement with College activities and personal contact with existing members
- Maintaining a voice and profile in the discussion of radiology issues

Member Value:

The commission continues to advertise and distribute the many benefits of ACR membership by means of a fact card detailing the tangible benefits of membership. Commission members are vocal advocates for engaging their medical physicist colleagues in College activities. The new Committee on Clinical Practice Assessment will be a key group for outreach to the medical physics community along with the Commission, emphasizing the opportunity to have an impact on and be a voice for medical physics within the broader radiology and radiation oncology communities. Ongoing participation in the review and comment process, especially for noteworthy organizations, lets members know that their knowledge is being used to help shape their profession and that they are part of something larger than a local practice.

Commission on Membership and Communications

Chair: William Herrington, MD, FACR

Member Communications Update:
This year's virtual Annual Meeting was a huge success with 1,429 total registrants. We surpassed our goal for medical student registration by 162% (or 81 people) and our YPS registration by 352.5% (or 141 people). The virtual meeting platform and our marketing communications strategy provided a smooth user experience for attendees.

The FY21 paid digital and social media member renewal and recruitment campaign concluded with 374 member renewals and 31 new member sign-ups, resulting in a minimum net revenue generated of $449,363.

ACR Marketing, Public Affairs and Communications, along with Government Relations, launched a "Scope of Practice" webpage informing members how ACR protects patient access to radiologist expertise by opposing state/federal non-physician SOP expansion legislation. The site features a new SOP Fund used with state chapters to educate lawmakers on SOP threats, showcases an interactive map where members can view SOP bills in their state and highlights the education and training requirements that make radiologists uniquely qualified to supervise and interpret medical imaging.

The Voice of Radiology blog was successfully migrated to acr.org's secure Sitecore content management system at the end of June. Total blog views are up 24% year-over-year.

A patient-facing website for the New IDEAS Study, in both English and Spanish, was launched in June.

The ACR Education Center will resume in-person courses in September, with 20 courses slated for the remainder of 2021. The announcement of in-person courses resuming was communicated through a variety of digital marketing channels. Individual courses are currently being promoted through an integrated marketing and communication campaign, including emails, social media and e-newsletters. To date, seven of these courses have reached capacity.

ACR outreach helped gain a quarterly enrollment record for the $100M, ACR-managed Tomosynthesis Mammographic Imaging Screening Trial (TMIST). From April-June, the study added 6,982 women and four new sites. Enrollment doubled during the COVID pandemic – which gained continued NCI funding for the trial.

ACR participated in five virtual tradeshows during the fourth quarter, resulting in over 500 engagements with attendees, including visits to acr.org, downloading collateral and online discussions with staff.

Recent enhancements to digital marketing communications include the creation of a dedicated webinar landing page with campaign-specific branding, form integration with Zoom, and additional features to strengthen GDPR compliance.

2021 Membership Numbers to Date:

- As of July 30, **90.6%** members have paid their 2021 membership dues compared to **84.1%** in 2020. This represents a **6.5% increase** from 2020**.**
- **165 more New Members (1,678)** have joined the ACR in 2021 compared to 2020.
- Nearly 100% of groups participating in Group Billing Program have paid their 2021 dues.
- **1,645 more members** (9,539) renewed their 2021 membership dues **online** than in 2020 (7,894).
- In June, ACR was awarded the prestigious **ASAE Gold Circle Award** for successful 2020 Membership Retention Campaign.
- **Reminder**: The grace period for 2022 dues has moved from June 30 to **March 31.**
- Despite the impact of COVID-19 on our members, we received very few membership dues waiver requests for the 2021 dues year.

Medical Education and Student Outreach (MESO)

- Medical student membership has grown from 458 in 2018 to 1,642 this summer.
- Medical Student Subcommittee - AIML Projects
  - Beyond the Hype: How AI Will *Really* Impact Careers in Radiology webinar (July 15, 2021)
    - Collaborative effort with the Medical Student Subcommittee and ACR DSI
    - Registration - 411; 324 Medical Students (136 ACR Medical Student Members, 188 Non-Members), 74 Other (ACR Member Physicians & Residents + organizations), 13 ACR Staff.
    - Attendance - 130 (32%)
    - VOR Blog Post written by moderators Gregg Khodorov, MD, MBA (PGY2) and Varun Danda, BS (MS4) and published on July 23, 2021.
  - Plans to develop AI curriculum modules for medical students
- Marketing
  - New member email campaign will be updated to target medical students by level; M1/M2 and M3/M4. Appropriate ACR products will be highlighted for level; for example: Guide to Radiology PIER Internships – M1/M2s, Appropriateness Criteria/Imaging 3.0 Modules M3//M4.
  - Creating a new medical student newsletter, similar to the ACR Member Update. It will launch in early October.

Committee on Fellowship Credentials

- We received a record numbe4 (181) of FACR applications for 2022.
- 176 candidates passed chapter review and are now undergoing CFC review.

Career Center/Fair

- The current record number of live job postings on the ACR Career Center is 14% higher than the previous record set in January 2020.
- While 80% of the postings are for diagnostic radiologists and only 2% of live postings offer teleradiology opportunities, the greatest number of job views and submitted job applications is for teleradiology.

- The Second ACR Virtual Career Fair will be held on Aug. 11, with **32** employers represented. Interactions between job seekers and employers may occur through chat, audio or video.

Engage Steering Committee Activity:

- Welcomed 3 new members: Noushin Yahyavi Abadi, MD; Quan Nguyen, MD; Ezekiel Shotts, MD
- Thanked Drs. Catherine Everett, Erik Friedberg, and Sonia Gupta for their service on the Committee
- Continue to develop procedures to monitor Engage for Code of Conduct violations and inaccuracies
- Working on plans to celebrate Engage's 5-year anniversary

Committee on Chapters:

- Evelyn Y. Anthony, MD, FACR is the new Chair of the Committee on Chapters
- A Bulletin article, *Using One Voice*, will be published in the August edition highlighting the new committee chair, Dr. Evelyn Anthony, as well as the work of the Committee on Chapters
- Five new committee members have been appointed; the new members are from Idaho, North Dakota, New Mexico, New York and Texas
- As part of an ongoing outreach campaign, Katie Kuhn is conducting outreach calls to each chapter president; as of August 6, phone calls have been made with 6 chapter presidents.

Senior and/or Retired Section (SRS):

- The SRS e-Newsletter was disseminated in July,

Resident and Fellow Section (RFS) and Early and Young Career Professional Section (YPS)

- The RFS and YPS co-sponsored a resolution on private practice equity at ACR 2021 which was referred to the BOC by the council. The intention of the resolution language is to protect radiologists during the transactions related to sale of private practices to corporate entities. A task force has been formed to collaborate between the RFS, YPS and leadership on final language.
- The RFS and YPS co-authored and collaborated on a resolution at ACR 2021 (Res. 48) on ACR recommendations on parental leave in response to the ABR's draft policy language on parental leave allowance during training. This resolution was successfully adopted by the Council.

Concerns:

- The Commission will be closely monitoring the 2022 member renewal rate after the grace period for dropping members' dues as a result of non-payment from 6 months to 3 months.

ACR Commission on Neuroradiology (NC)

Chair: John E. Jordan, MD, MPP, FACR

Commission Update:

- The NC/HII workgroup (TBI-WG) is continuing its' work with Common Data Elements (CDE) for creating the TBI-RADS. The TBI-WG is being expanded in furtherance of this goal to involve more institutions and neuroradiologists. The ACR-ASNR-SPR TBI practice parameter (PP) first draft has been completed and is undergoing field review for comments. The international working group for TBI reporting will be surveying essential TBI clinician stakeholders at multiple institutions in the U.S. and abroad (neurosurgeons, neurologists, neurointensivists, etc.) to gauge clinician reaction and allow important feedback regarding the utility of the developing standardized reporting and improve understanding of the most desirable information clinicians are currently seeking in the reports. The NC TBI WG continues its collaboration with the ACR Research Commission to further the goals of clinical translation of TBI research developments.
- The NC Magnetic Source Imaging workgroup has received approval for an ACR White Paper without policy from the ACR Executive Committee to serve as a clinical guideline on the practice/performance of magnetoencephalography (MEG). This project is well underway.
- On Health Equity, the NC continues to support health equity collaboration within the ACR, as well as inter-society efforts to advance the goals of health equity within radiology. The NC seeks to work closely with Dr. Jaqueline Bello and colleagues who are leading the Radiology Health Equity Coalition, for which the ACR is a convener. The ASNR, and a number of neuro subspecialty societies have responded favorably to NC outreach efforts and have joined the ACR Health Equity Coalition. The NC workgroup has a publication recently accepted and in press, and one in revision expected to go to press shortly. The NC has provided representation in supporting educational programs regarding health disparities and health equity in neuroradiology at the ASSR, and ASNR annual meetings earlier this year. The NC collaborated with the NMA (National Medical Association) to provide a symposium on Health Disparities and Neurologic diseases this summer at the NMA Annual Meeting and Scientific Assembly.
- Interventional Neuroradiology: The NC is sponsoring (with the ACR Committee on Practice Parameters-Neuroradiology) application for a new ACR Practice Parameter on Facet Pain Blocks, including denervation and rhizotomy techniques, for the 2023 Practice Parameter cycle. This will be an evidence-informed practice parameter.
- Advocacy/Engagement: The NC continues to weigh-in with meetings, public, and private comments and reviews, for efforts related to clinical standards, practice guidelines, payment policy, intersociety collaboration, patient-centered care, and quality metrics, pursuant to its ongoing responsibilities and network relationships. Recently included in these efforts:

- The NC has nominated and helped sponsor neuroradiologist candidates for participation in the development of evidence-informed practice guidelines for the National Association of Epilepsy Centers.
- NC support and recruitment for the ASSR and collaborative member national survey regarding clinical management patterns for vertebral marrow signal abnormalities seen on MRI, with the long-term goal of creating standardized reporting guidelines.
- NC review, evaluation, and comment on the *Agency for Healthcare Research and Quality's* (AHRQ) draft for a systematic review on Interventional Treatments for Acute and Chronic Pain. Collaborative review groups included: MPW, ASSR, ASNR, SNIS, SIS, AAPMR, and NANS. The ACR also signed on.

- The Neuro Commission Education Workgroup will be working with ACR Chapters, anticipated to begin this fall to support educational programs in neuroradiology for general radiologists.
- Appropriateness Criteria Neuro Panel (Amanda Corey, MD, Chair; NC mem.)
  - JACR Publications planned for November 2021
    - Low Back Pain
    - Plexopathy
    - Suspected Spine Infection (new topic)
- Practice Parameters--Neuroradiology [2021-22] – (Steve Hetts MD, Chair, NC mem.)

  1) ACR–ASNR–ASSR–SPR practice parameter for the performance of CT of the spine. 2) ACR–ASNR–SPR practice parameter for the performance of CT perfusion in neuroradiologic imaging. 3) ACR–ASNR–SPR practice parameter for the performance of CT perfusion in neuroradiologic imaging. 4) ACR–ASNR–SPR practice parameter for the performance of fMRI of the brain. 5) ACR–ASNR–SPR practice parameter for the performance of fMRI of the brain. 6) ACR–ACNM–SNMMI practice parameter for the performance of dopamine transporter (DaT) SPECT imaging for movement disorders.

Areas of Concern/Member Value:

- Membership engagement is one of the Commission's goals for this year in accordance with the ACR strategic plan. Of critical importance is to provide members with services and products that they truly value such as the educational offerings, and clinical practice guidance to enhance quality and competence.

- There continues to be somewhat of a disconnect between advanced research in radiology and translation to clinical practice. The work with the ACR HII and Research Commission is designed to help reduce the gaps that appear to be growing between cutting-edge research and clinical translation.

- Inter-society collaboration, cross-commission collaboration, and international engagement bolster the external relationships outlined in the ACR strategic plan and allow leveraging of core competencies that may exist outside of the organization, while enhancing deliverables through intraorganizational cooperation, for the benefit of members and patients.

Commission on Nuclear Medicine & Molecular Imaging (NM & MI)

Chair: Don C. Yoo, MD, FACR

Government Relations Committee:

- ACR continues to await a Nuclear Regulatory Commission (NRC) vote on SECY-20-0005: Rulemaking Plan for Training and Experience Requirements for Unsealed Byproduct Material, which has been opposed by the ACR.
- ACR continues to advocate for denial of a petition for rulemaking (PRM-35-22) filed by an injection site monitoring device manufacturer which asked NRC to require dosimetry and reporting of certain nuclear medicine injection extravasations as Medical Events under 10 CFR 35.3045.
- ACR organized a meeting of society staff with NRC to discuss NRC's SECY-21-0013: Rulemaking Plan to Establish Requirements for Rubidium-82 Generators and Emerging Medical Technologies.

Economics, Nuclear Medicine Committee:

- The Committee provided input to the ACR Government Relations, HOPPS, and Coverage Committees whether the ACR should support the Medicare Diagnostic Radiopharmaceutical Payment Equity Act of 2019 (H.R. 3772). In the past, the ACR has remained silent on this bill as it is believed the legislation would transfer money from hospitals/providers to the vendors. However, new concerns have arisen as the payment relates to the IDEAS study for amyloid PET imaging that may create substantial issues in maintaining enrollment numbers in the IDEAS study.
- The Committee recently provided input and clinical expertise on Anthem's medical coverage policy for SPECT/CT Fusion Imaging.
- Dr. Franc, Chair of the Committee wrote an ACR Bulletin article updating ACR members on CMS' Medicare Administrative Contractor (MAC) reimbursement for FDG PET for inflammation/infection.
- The Committee has been working with the Carrier Advisory Committee (CAC) on local coverage determinations (LCD) for FDG PET for Infection/Inflammation.
- The Nuclear Medicine Committee reviewed MIPS measure: ACRad 41 *Use of Quantitative Criteria for Oncologic FDG PET Imaging* and determined that HCPCS code G0252 should be removed from the measure.

Practice Parameters & Technical Standards:

The following documents for the 2022 cycle are in the review process which begins August 23rd.

- ACR–ACNM–SNMMI–SPR Practice Parameter for the Performance of Renal Scintigraphy
- ACR–ACNM–SNMMI Practice Parameter for the Performance of Dopamine Transporter (DaT) Single Photon Emission Computed Tomography (SPECT) Imaging for Movement Disorders
- ACR–ACNM–SNMMI–SPR–STR Practice Parameter for the Performance of Cardiac Positron Emission Tomography – Computed Tomography (PET/CT) Imaging

- ACR–AAPM–ACNM–SNMMI–SPR Technical Standard for Therapeutic Procedures Using Radiopharmaceuticals
- ACR Practice Parameter for the Performance of Molecular Breast Imaging (MBI) using a Dedicated Gamma Camera

NM & PET Accreditation:

- NM: 3330 facilities accredited; 30 facilities in process; 3360 facilities active; 30 active clinical; 29 active phantom reviewers; average reviewer turnaround time = 6.2 days.
- PET: 1632 facilities accredited; 15 facilities in process; 1647 facilities active; 30 active clinical; 29 active phantom reviewers; average reviewer turnaround time = 4.8 days.

Other Issues:

ABR 16-month Pathway in Nuclear Radiology

- Currently residents are actively enrolled in or have completed the ABR 16-month pathway leading to specialty certification in diagnostic radiology (DR) and subspecialty certification in nuclear radiology (NR). There are 57 participating DR or IR residency programs. Many residencies have enrolled more than one resident; one program has enrolled 11 residents since the inception of the Pathway in July 2017. Graduates of the Pathway who are ABR DR or IR/DR diplomates are eligible to sit for the annual ABR NR subspecialty certification examination.

Summer 2021 Interim Report

Patient- and Family-Centered Care Commission

Arun Krishnaraj, MD
Tessa Cook, MD, PhD

Commission/Task Force Update:

- **Education Committee:**
  - Dr. David Sarkany has joined as co-chair replacing Dr. Cheri Canon.
  - Art & Radiology was presented at the Annual Meeting. The exhibits were in a virtual Gallery style and included "Meet the Artist" chats and before and after events.
  - Plans to work with RSNA and RadiologyInfo.org to further Dr. Sheri Wang's children's educational coloring book series to support children and families in understanding imaging procedures.
- **Quality Experience Committee:**
  - Amanda Itliong has accepted the co-chair position replacing Dr. Ashima Lall. Amanda is the first patient in the college to hold this position.
  - Current/In Process - PFCC patient pledge (project led by Incoming Chair Dr. Sabiha Raoof). A subcommittee was formed for a new patient care pledge. The pledge is a commitment from physicians to provide Quality Patient- and Family-Centered Care. The proposal is with ACR Leadership for endorsement.
  - *JACR* Associate Editor, Andrea Borondy Kitts and the ACR Appropriateness Criteria (AC) Subcommittee continue to publish AC Patient-Friendly Summaries. 70 have been published to date.
- **Economics Committee:**
  - Revising JACR article (first submitted in summer 2020) detailing the results of the patient perception survey from 2019. The survey aimed to help better understand adult healthcare consumers' expectations and experiences with key imaging modalities including mammography, CT, and MR. The reviewers asked for further information.
  - Seeking an IRB waiver for a MIPS mammography Improvement Activity survey (different from the patient perception survey detailed above). We're also working with ACR's Quality & Safety Department to use a pre-existing registry for data-gathering purposes.
- **Population Health Management Committee:**
  - Currently producing new episodes of the ACR Bulletin Podcast. Several episodes will be devoted to topics related to population health management.
  - We produced a new installment in our PHM webinar series that examined how image-based screening can be central to PHM success. This was the third of a planned five-part series.
  - Published an Advocacy in Action e-newsletter article (technically at the end of March, but we didn't share it in the last report) and a Voice of Radiology Blog post detailing some of our previous PHM webinars. We also wrote the first installment of a standing PHM column in the ACR Bulletin, which will be published in the September issue.

- **Lung Cancer Screening Steering Subcommittee:**
  - The incidental finding nurse navigator pilot was completed successfully. It received a lot of wonderful positive feedback about the one pager created by the LCS Steering Committee. The feedback is being incorporated into the one pager and is in the final stages of edits and is projected to be released by November.
  - Currently working with Respiratory health association to hold a free CME tobacco cessation training in November for LCS awareness month.
  - NLCRT/ACR Webinar Series is underway addressing USPSTF New Guidelines: In partnership with NLCRT for the second year, the webinar will feature perspectives from key stakeholder groups, including patients, primary care physicians, pulmonologists, radiologists, epidemiologists, behavioral scientists, oncologists, and thoracic surgeons. There are 1,761 registrants, the webinars are available on demand as well. We are averaging 500-550 attendees each webinar and 274 viewings of the on-demand webinars to date.
  - After successful launch of the Mythbusting podcast series, NLCRT and ACR is teaming up again to launch a second podcast series in November to supplement the highly successful webinar series that is currently happening now.
- **Joint RSNA-ACR Public Information Website (Radiologyinfo.org):**
  - After a slow down from COVID-19 we are seeing the visitors climb once again, getting closer to the 2M visits mark.
- **Outreach Committee:**
  - Several work groups within the committee have started working on projects including raising awareness around the PFCC Toolkit, patient videos to promote the AC Patient Summaries, Health Equity, building a PFAC Implementation Guide, and collaborating with other commissions and state chapters.
  - The PFAC Implementation Guide landing page will launch in the fall.
  - The Social Media subgroup is under this committee; Imaging 3.0 Case Studies, including those under the Patient Experience category, are routinely shared by this group.
  - The AMA Ed Hub pilot is continuing after launch at ACR 2019. Request for more LCS and CDS content from AMA. Imaging 3.0 Case Study content being delivered continuously with participation credit added by AMA.
- **Digital Media and Public Affairs Updates:**
  - From April 1 - July 31, there were 37 social media posts regarding #PFCC work, resulting in 1,210 engagements, 342 link clicks for more information and 111,362 impressions. Social media posts sharing an Imaging 3.0 Case Study on Patient-Friendly Radiology Reports, celebrating Patient Experience Week, and the new Radiology Health Equity Coalition received strongest engagement.
  - The Voice of Radiology Blog post "We Are All the Patient Experience" (April 22) by Arun Krishnaraj, MD, MPH, Chair of the ACR Commission on Patient- and Family-Centered Care, was read by 280 people and also featured in *Advocacy in Action*, a weekly e-news read by more than 20,000 ACR members.

Areas of Concern:

Key areas of concern for the ACR, Board of Chancellors or profession moving forward include (please list in the order of importance):

- Adequate funding and resources needed for impactful changes to lung cancer screening rates.

- Support for PFCC vice chairs/leaders at radiology practices.

Member Value:
The Commission on Patient- and Family-Centered Care works to ensure high-quality radiologic care is provided in a manner that incorporates the needs, wants, and values of our patients and communities and leads to improved health care satisfaction. The Commission promotes constructive relationships between radiologists, their patients, families, and communities to support radiology participation in emerging alternative payment models.

Commission Goals:
The Commission will produce resources to help radiology professionals provide and document patient- and family-centered care, including:

- Recommendations and tools to help radiology practices engage with patients and families as healthcare partners and to forge closer relationships with communities
- Resources to facilitate the use of technology to improve communications, education and flow of information to all stakeholders, including patients and clinical partners
- Information regarding how best to measure quality and patient outcomes in radiology
- Tools, metrics, and policies created with other ACR commissions that help radiology practices incorporate patient- and family-centered care principles and meet Merit-based Incentive Payment System (MIPS) and alternative payment model requirements

Commission on Pediatric Radiology and its Committees

Chair: Richard Barth, MD, FACR, FAAP
Co-chairs: Richard Heller, MD and Sarah Milla, MD

Pediatric Radiology Committee on Economics:

Our committee is continuing in its collaborative efforts with the ACR, AAP, and SPR, focusing on inequities and disparities in patient care in general, and pediatric radiology in particular. As previously stated, the outline for the year is a multi-part series:

- Part I: Foundational: What are the inequities and disparities in pediatric care?
- Part II: Role of Radiology: An examination of disparities in pediatric radiology and barriers to care.
- Part III: Research opportunities: How have certain policy reforms impacted pediatric radiology care?

In support of Part I, on April 30, Dr. Shale Wong, Executive Director of the Eugene S. Farley, Jr. Health Policy Center at the University of Colorado and a Professor and Vice Chair for Policy & Advocacy in the Department of Pediatrics spoke to our group. She discussed the importance of inequities research and evidence-based advocacy, commenting that "advocacy without data is just opinion." She added that as physicians, advocacy is in our DNA. She helped inspire the committee to begin work on a paper on advocacy for Pediatric Radiology.

In support of Part II, Valerie L. Ward, MD, MPH, the Chief Equity and Inclusion Officer and Director, Sandra L. Fenwick Institute for Pediatric Health Equity and Inclusion and Director, Office of Health Equity and Inclusion at Boston Children's Hospital and an Assistant Professor of Radiology, Harvard Medical School is scheduled to address the committee in August.

In terms of advocacy on the issue of patient steerage, United Healthcare and Cigna revised their site-of-care policies to allow for hospital-based pediatric imaging. The group continues its multi-societal communications with Anthem and will provide an update on them in the next communication.

Pediatric Radiology Workforce Committee:

Shannon Farmakis, MD

The committee, with the help of SCARD, SCORCH, and the Ped Rad Fellowship Program Directors, identified individuals at many academic medical centers to serve as the committee's liaisons to share information and ideas as well as distribute materials the committee develops. A Google Groups forum has been established to communicate with these liaisons. We also added a radiology resident to the committee roster.
Three subcommittees have been formed:

1. The first will develop and carry out a social media campaign including video testimonials (via recorded Zoom interviews) of pediatric radiologists from diverse backgrounds and career levels in order to capture interesting stories about why they chose careers in pediatric radiology. In addition, quotes of pediatric radiologists will be included in individual posts.

a. The hashtag #imagingourfuture has been registered with Symplur. A message was sent to SPR membership encouraging members to use this hashtag on pertinent social media. In addition, when appropriate, members will also be encouraged to use the following hashtags to gain resident and medical student attention: #furtureradres, #radres, #medstudents, #medstudent. #Pedsrad is the official hashtag registered for use with pediatric radiology.
b. Yasha Gupta, a Chief Resident at Mount Auburn Hospital and very active member with the RFS section of the ACR is a Twitter superuser. She has graciously agreed to tweet content for us when asked. In addition, she has recorded interviews with Ami Gokli and Judy Gadde, both members of the Workforce Committee, as part of a series of spotlight videos she is doing to do to highlight the various radiology subspecialties. These are posted on YouTube and on the SPR webpage.

2. The second subcommittee has developed two video presentations with the goal of introducing DR residents and medical students, respectively, to pediatric radiology as a career and dispelling myths about pediatric radiology in order to increase recruitment into pediatric radiology. Both videos have been released and were distributed via the Google group listserv, posted to the ACR's YouTube page and SPR's webpage, and a link to the presentation was shared via the SPR's Facebook and Twitter accounts.
3. The third subcommittee has been formed for student outreach. Since virtual career and radiology fairs will likely continue even after the pandemic, the members will develop standardized content and presentations for volunteers to use at these virtual events to highlight pediatric radiology. Additional efforts will be directed at finding methods to engage medical and premedical students to increase interest in radiology and pediatric radiology. A rising 2nd year medical student, Talia Fradkin, who just completed the ACR's PIER Internship has joined the committee and will offer a unique perspective for these endeavors.

In addition, several articles have been written to promote pediatric radiology:

- Shannon Farmakis wrote an article for the AAWR's Fall newsletter entitled "Pediatric Radiology: An Important and Impactful Career Choice."
- Through collaboration with the ACR's RFS, two articles appeared side by side in the eBlast newsletter sent out in November.
    - The first was written by two pediatric radiology fellows, Jennifer Gillman at CHOP and Maria Bedoya at Boston Children's, and was entitled "The Value and Joys of Pediatric Radiology."
    - The second was written by a 3rd year radiology resident going into pediatric radiology, Arielle VanSyckel at Indiana University School of Medicine, entitled "Choosing a Career in Pediatric Radiology." These were subsequently distributed through the SPR's social media accounts.

Eric Rubin, Chair, ACR Commission on Human Resources and Shannon Farmakis, a member of the HR Commission, are collaborating on pediatric content for future workforce surveys. Shannon Farmakis and Richard Barth wrote a Letter to the Editor to address the exclusion of pediatric radiology from the 2019 ACR's HR Commission's Workforce Survey, which was published in JACR. Letter to the Editor Attached as Appendix 1.

The committee has also been involved in volunteer efforts. We had approximately 4 volunteers that participated in a virtual booth both for the ACR and AAWR at the UC Davis Pre-Health

Conference on October 17, 2020, where they were able to meet with pre-health and medical students in breakout rooms and introduce them to pediatric radiology. We also had volunteers that participated in the ACR's virtual booth for the Chicagoland Virtual Radiology Expo on November 14, 2020. Students at Meharry Medical School in Nashville contacted the ACR asking for a pediatric radiologist to speak to their Radiology Interest Group, which Ami Gokli agreed to do. The ACR also selected a panel discussion submitted by four of the committee members (Ami Gokli, Judy Gadde, Neil Lall, and Leah Leonhardt) focusing on pediatric radiology for the ACR-AMSA excursion that was done on March 8, 2021. A subcommittee dedicated to creating content for these outreach efforts with medical students is in the process of being formed.
Content was updated on two SPR webpages with new access points leading from the first menu dropdown list on the SPR's homepage, which are listed under Career Information. There is a link for trainees ("Is Ped Rad for me?"), with updated information about the subspecialty and myth busters as well as links to helpful resources and articles. The second link is for faculty ("Recruiting Toolkit"), which provides an updated Top 10 Reasons to Go into Pediatric Radiology as well as links to the committee videos and video bundle (script, resources, PowerPoint, etc.). The third link leads to the Career Center.
A collaboration is underway with the jSPR to develop a formal mentorship program to match attendings with medical students, residents, and fellows.
The Committee worked with the Co-Chairs of the Education Committee, Cindy Rigsby and Ben Taragin, and with the SPR Physician Resources Committee to create and promote a new series of lectures to introduce medical students to the field of pediatric radiology. It is titled *Pediatric Radiology: Journey to Imaging Our Future* and was released by the ACR in mid-March 2021 as a webinar.
Shannon Farmakis is working with Richard Barth and Jocelyn Chertoff on a White Paper promoting the need for a mandatory radiology rotation in the 3rd year of medical school, and also address the need for radiologist presence in the design/development and teaching of radiology in the pre-clinical years that will hopefully get the attention of the AAMC/LCME. A commentary was also written by Drs. Farmakis, Chertoff, and Barth that was just accepted to the JACR entitled "Pediatric Radiologist Workforce Shortage: Action Steps to Resolve."

ACR Pediatric Imaging Research Committee:

Raj Krishnamurthy, MD

Update on the status of the Imaging Registry for Orphan and Rare Disease (I-ROAR) at the ACR.

- I-ROAR is a multi-institutional imaging registry, research engine and academic resource, which serves to extract knowledge from the collective clinical experience of ACR membership for the benefit of patients with rare diseases. It was supported by a ACR Innovation Award Feb 2020, with commitment from 15 largest children's hospitals in North America, major pediatric imaging societies, and 3 major imaging vendors. Its aim was to create the infrastructure for the registry, including the informatics platform that would support archival and analysis of clinical studies for vetted projects, and a collaborative scientist network that can leverage this infrastructure to obtain independent federal funding. Mandate from ACR leadership at the time of funding was to focus on long-term sustainability through collaborations with partner networks/institutions focused on pediatric data registries like PEDSnet, and demonstration of a proof of concept project involving the use of imaging biomarkers for rare diseases, which will refine a standardized workflow, which may be reproduced for future studies.

- In the spring of 2021, a PEDSnet-IROAR collaborative project was funded through Sanofi Pharmaceuticals, which would serve as the proof of concept project entitled 'Evaluation of Foramen Magnum Growth in Children with Achondroplasia' prepared by PEDSnet, Nationwide Children's Hospital, and the American College of Radiology Center for Research and Innovation (ACR CRI). The funding is approved for a total budget of $1,118,269, with a ACR Budget of $582,472. We have engaged the radiology chiefs of the 7 PEDSnet institutions participating in the study and have appointed radiology co-investigators from each of the institutions as well as subject matter experts from the institutions contributing the highest volume. Data use agreements are currently being processed, with image collection scheduled to begin in October/November, study review in Jan, and end of study in April 2022.
- In July 2021, a second proposal involving I-ROAR and PedsNET on 'The PCORnet® Study of Post-Acute Sequelae of SARS-CoV-2 in Children and Adolescents' was submitted in response to the SARS-CoV-2 Recovery Cohort Studies Research Opportunity Announcement (OTA-21-015B) for EHR and Health Plan Real-World Data. This uses the National Patient-Centered Clinical Research Network (PCORnet®, pcornet.org) for studies on post-acute sequelae of SARS-CoV-2 infection (PASC) in children and adolescents. The data resource we propose comprises: (1) structured and unstructured EHR data from all 9 PCORnet Clinical Research Networks (CRNs) and 53 member medical institutions; (2) health plan data from HealthCore (a research subsidiary of Anthem); (3) strategic relationships with the American College of Radiology (ACR) for pediatric imaging data and the American Immunization Registry Association (AIRA) for linkage with vaccine data; and, (4) patient-reported, biosensor, and geospatial data. Using these data, we will describe and evaluate the phenotypic expression of pediatric PASC. An imaging registry is being created at the ACR as part of this proposal for pediatric COVID comprising CXR, chest CT and CMR, which will be the largest of its kind in children. The ACR budget for this study is $729,738, not including salary support for the investigators and SMEs. This proposal has been selected for Phase 2 by the NIH, with final decision on funding due soon.
- In Aug 2021, a new proposal entitled 'MIDRC Bridge2AI AI-Ready Medical Image Data at Scale (AIR MIDRC)' was submitted to the NIH, involving a collaboration of I-ROAR with MIDRC. The overall goal of this proposal will combine the previous experience of acquiring data from multiple institutions in the existing MIDRC repository to build an AI-assisted data acquisition process and triage (ADAPT) pipeline with a modular architecture allowing for non-clinical 'Helper AI' models to help catalog the data to fuel medical ML research and innovation, providing better standardization recommendations [Standards Module], data curation and annotation [Tools Development and Optimization module], and compliance with ethical responsibilities [Ethical and Trustworthy AI Module]. This method of AI-based data cataloging will also be helpful for AI education [Skills and Workforce Development module] especially for discovery of relevant data. IROAR is being represented in the Standards Module.
- On 08/24/2021, a meeting was held with research leadership of the ACR to consider elevation of I-ROAR as a permanent registry under the auspices of ACR National Clinical Imaging Research Registry (ANCIRR). This will lead to enhanced visibility for I-ROAR as an

ACR-supported resource and reiterate the commitment of ACR to the study of rare/orphan diseases, as well as to the large pediatric membership of the ACR, since this is the first registry by the ACR focused on pediatric and childhood onset disease. Combining the resources of ACR as a leader of imaging research and innovation, and PEDSnet as the largest multi-institutional research entity in pediatrics can lead to meaningful collaboration and bring to fruition some projects in rare and orphan diseases that might otherwise be logistically impossible.

Pediatric Education Committee: Co-Chairs:
Jennifer Nicholas, MD and Ben Taragin, MD, FACR

1. Introduction of Jennifer Nicholas as the new Co-chair of the committee and thanks to Cindy Rigsby for all her efforts as Co-chair over the last four years. Cindy will remain on the committee.

2. Refocusing our committee with the hope of decreasing covid restrictions.
Firm up plans for meetings during IPR, RSNA, and SPR 2022 so that committee members have enough lead time to plan accordingly. Discussed reasonable goals for projects below temporarily connected to upcoming committee meetings. Discussion of plans to have hybrid meetings of the committee at upcoming IPR and RSNA meetings.

3. Awaiting the ability to reconnect with the ACR grant for *Imaging the World*, which provides prenatal imaging in Africa. The grant proposed the inclusion of pediatric imaging as well. *Since the Innovation Grant Program is suspended and much of the necessary work is not possible because travel is not possible, we will revisit this project with the WFPI over the coming year.*
4. Supporting *Image Gently* in the development of their training for medical student.

5. Discussion of new projects:

I. Creation of a child abuse learning module for residents and attendings on the spearheaded by Megan Marine, new educational committee member.
II. Continued interest in development of a pediatric Pet MRI module by Janet Reid.
III. creation of educational content slash modules 4 residence training in radiology in the Community Hospital setting regarding basic understanding of follow-up of congenital heart disease and or organ transplantation. Currently being reviewed by Ami Gokli

6. Connected to the above projects, further discussion of platforms for creation of learning modules and Radiology content. Specifically, is the ACR willing to lend technical and other support to creation of modules that will be cosponsored by the ACR and SPR.

7. Discussion of proper image display possibilities for various modules including Pacsbin and/or Cortex. Additional discussion regarding implementation of RACHELS , non-internet based local servers for packaging educational content.

8. Discussion of rereleasing the core lecture pediatric radiology top hits in the September window as students are finalizing career opportunities and applications as well as during the March. When students are reflecting on the previous match and the upcoming years applications.
From March 1-July 31*, we had 384 total plays, and the breakdown is as follows:

Fetal MRI- 54
A Day in the life of PD – 106
Elbow Injuries – 53
Why MRI Rocks – 119
Using Informatics to Engage Patients – 35
The Fascinating World of PD – 17

Since April 12th (the last time the marketing plans were reported), we have run the following promotions:

4/18 Med student recruitment email,
4/21 RFS E-Newsletter on,
4/21 Member Update
6/13 Med Student recruitment email
7/13 Member Update
8/12 Smartbrief

Pediatric Safety and Quality Committee:

Chair, Jonathan Dillman, MD, MSc

Our Pediatric Safety and Quality Committee has continued to setup our MRI Safety Learning Group. Our REDCap instruments have been finalized and demonstrated to pilot participants. The REDCap files/dictionaries were transferred from Texas Children's to Cincinnati Children's for future management, as Dr. Hayatghaibi is changing institutions. All IRBs/exemptions are now in place. A final data sharing agreement is pending. We anticipate rolling this out (ie, collection of baseline MRI safety data) by October. We also continue to serve as an interface between the ACR and Leapfrog Group regarding patient safety questions pertaining to safe use of CT.

ACR Dose Index Registry for Digital Radiography:

Steven Don, MD, FACR

As reported this spring, the Subcommittee is accruing data from academic, community, and children's hospitals and forming a working group from centers submitting data. If held, an update from the first meeting will be provided during the next reporting period.

Committee on Practice Parameters:

Terry Levin, MD, FACR

There are 23 pediatric-related practice parameters cosponsored with the SPR and ASNR being updated for the 2022 cycle by writing committee members.
Five documents are currently ready for the first field review beginning the end of Aug. These include practice parameters for CT Spine, CT traumatic brain injury (new parameter), CT functional Brain MRI, Cardiac PET/CT imaging and MR of the wrist.

Five documents are ready for the second field review cycle which begins the second half of September. These include CT perfusion Neuroradiology, Creation of TIPS, Arteriography, interpretation of CT and Spine radiography.
The remaining documents should be ready for the third field review cycle at the beginning of October or the fourth field review at the end of October as they are being finalized.

Pediatric Rapid Response Committee:

To Be Identified

Discussions are underway about the roles of the RRC and the PRRC with Dr. Larson (ACR Q&S Commission Chair) and Dr. Lockhart (AC Chair). Once the scope of the Committee has been defined, a new chair will be appointed.

Commission on Publications and Lifelong Learning

Chair: Lori Deitte, MD, FACR

Commission Update:

Radiology-TEACHES

- Radiology-TEACHES now has 55% of the medical student programs participating, giving authoring opportunities to medical students, and has engaged 24% of DO medical schools and made significant penetration into PA and NP programs with CDS training. The RT Escape Room has experienced increased engagement and has a case study published with Imaging 3.0.

STARS

- STARS, a successful pilot program in collaboration with AMSER, is now powered by Cortex and will be offered free of charge for medical schools.

MESO

- MESO and COPLL are working hand-in-hand to provide a medical student training program and give medical students the opportunity to learn about and engage with radiology. The Medical Student Curriculum was also launched on acr.org

DXIT/TXIT Exams

- DXIT is scheduled for January 3-31, 2022 and will be delivered on the Cortex platform. TXIT is scheduled for March 3-18, 2022 and will also be delivered on Cortex. For DXIT and TXIT, the proctoring vendor, ProctorTrack will be used rather than using Prometric. DXIT Committee members (13 section chairs) are scheduled to meet virtually August 12-13, 2021, to finalize the DXIT 2022 exam questions. TXIT Committee members (13 section chairs) are scheduled to meet virtually October 7-8, 2021, to finalize the TXIT 2022 exam questions.

RadExam

- RadExam was scheduled July 1, 2021-June 30, 2022, for registered residents. There have been delays with the registration process for some sites, which are being addressed by a cross-departmental team including Membership, Accounting, Operations, IT, Cotex and CoPLL. This exam provides the ability for residents to review questions and explanations, particularly pertinent to specific rotations; >150 exams are available.

Well-Being Program

- Phase II was launched in the summer with a call for case studies. The first one will be published in early August and is on a well-being curriculum and fitness challenge developed within the Radiation Oncology Department at Mayo. Two other case studies are in pre-publication processes.

Rectal Cancer Staging

- 97 individual purchases of the RCS course. Seven institutions have taken advantage of group pricing during this March-July time period.

Lung Cancer Screening

- The Lung Cancer Screening Education Course was reviewed, updated, and renewed for 15 CME/SA-CME valid through 6/20/2024. Updates to the module include reference to Lung-RADS® version 1.1. The updated module went live on 6/21/2021 and has obtained 218

enrollments to date post launch of updated content. The updated module is also now available on the AMA EdHub.

Case in Point

- Cases of the month are published in the Bulletin and highlighted via email and social media. CiP continued to provide COVID cases, publishing several COVID vaccine reaction cases beginning in March 2021. For the second year, ACR's PIER summer program medical student interns have worked with their radiologist preceptors to submit a case for publication in Case in Point. 78,275 CME credits have been claimed in the March-July period, representing the completion of 313,100 cases.

Continuous Professional Improvement (CPI)

- Released CPI Neuroradiology 2021 & CPI Musculoskeletal 2021; this period of time had 1,500 participants with 1,800 modules purchased. Feedback includes the following: "Good learning experience. Another reason to support the ACR." And "Great, effective, humbling program-shows weaknesses effectively." And "I love CPI and hope it will be around for the duration of my career."

Bulletin

- The ASBPE awarded the September 2020 health equity special issue with a national Gold Award in the Special Section Category. The second season of the ACR Bulletin Podcast on Mythbusting Lung Screening received an APEX Award of Excellence in July. In May, the Bulletin launched a new series to explore how the College is reimagining several of its focus areas during the COVID-19 era and beyond. The goal is for everyone to have a voice in defining success to make the College a more diverse, inclusive, and resilient organization.

ACR Annual Meeting, 2021

- Collaborated with the Commission on Human Resources, Commission on Patient-and Family-Centered Care, Commission for Women and Diversity, and Radiology Leadership Institute to develop a two-part CME session on health equity. Dr. Geraldine McGinty delivered opening remarks and highlighted the need to address health disparities. Both live sessions were well attended (approximately 500 attendees total) and recordings are available to ACR members.

AIRP

- 642 attendees at the Feb/March 4-week course; the July 4-week course had 202 attendees, typical for a summer course due to board exams. We launched a PR initiative on the name change to the ACR Institute for Radiologic Pathology. The AIRP site has begun migrating to ACR.org. We will be adding Accredible to the Canvas interface, which provides a dashboard for ACR to display all certificates, badging and CME in one place for members.

Education Center

- Amanda Hanova is leading the transition back to classes at the Ed Center in September, with the understanding that as conditions around COVID change so might the schedules.

Areas of Concern:

With a temporary staffing shortage, we are concerned that the delivery of Cortex services may be affected.

Member Value:
CoPLL has become a commission providing Continuous Professional Development (CPD). CoPLL committees and programs are responsive to member needs with publications, Imaging 3.0, the innovative *Changemakers* series, podcasts, and webinars on Economics and Population Health management. CoPLL provides timely resources to help our members learn, during and outside of the COVID-19 pandemic, through educational resources, award-winning publications, and collaborations with other ACR commissions and external partners such as AHA, AMA, AMA Ed-Hub, the APDR, APDIR, AMSER, and others.

Commission on Quality and Safety

Chair: David B. Larson, MD, MBA

- **Radiology Learning Network and Improvement Projects**
  - ACR was awarded a grant from the Gordon and Betty Moore Foundation for the development of a radiology learning network. Our proposed project seeks to improve diagnostic excellence in imaging, with a focus on cancer, using a learning health systems approach to simultaneously develop performance measures and validated improvement strategies at multiple local sites, followed by broad dissemination of both measures and improvement strategies.
  - ACR ran two cohorts of structured improvement projects, with 3 teams within ACR and 8 radiology practices. The projects ran March-August 2021 and graduated showing demonstrable improvement in outcomes in their chosen projects.
- **Appropriateness Criteria**
  - The April 2021 AC content release included 13 new and 5 revised AC topics. There are now a total of 211 AC documents with nearly 1,900 clinical scenarios. 67 AC patient-friendly summaries have been published in JACR with members from the Subcommittee on AC Patient Engagement serving as technical reviewers and co-authors.
  - In June, the Centers for Medicare and Medicaid Services (CMS) renewed ACR status as a Provider Led Entity (qPLE) for an additional 5 years. Only qPLEs are eligible to develop appropriate use criteria (AUC) for advanced diagnostic imaging services under the PAMA 2014 legislation.
- **RADS**
  - An initiative to standardize RADS projects and resources is currently in process.
- **PP&TS**
  - 2022 Document drafts are in progress with 38 writing committees (36 Revisions, 2 New Documents – Collaborative with 19 societies). First field review is beginning 8/23/21, with 8 documents in first cycle.
- **Metrics and QCDR**
  - ACR's grant contract with the Gordon and Betty Moore Foundation supported the Closing the Recommendations Follow-up Loop Measure Set's development. Testing and analysis on this measure set will continue until the measure's feasibility, validity, and reliability are demonstrated.
  - The Measurement Strategy Group (MSG) is defining the process for prioritizing new quality measure concepts and existing measures for addition into the QCDR portal, including ACR's topped-out measures utilized in MIPS and MSN's QCDR measures available to ACR for licensing.
  - CMS released the Medicare Physician Fee Schedule with QPP proposed updates on July 13, 2021. ACR Q&S staff provided a brief and detailed summary for the ACR membership on the potential revisions to the QPP, including possible removal and measure score caps on the MIPS clinical quality measures and rules for organizing, participating in, and scoring MVPs.

- **Registries**
  - We are in process of defining a working relationship with American Cancer Society to share data and resources for effective analysis of data for Lung Cancer research projects.
  - GRID registry is supporting testing and implementation of measures on closing the follow-up loop; these measures were developed under a grant from the Moore Foundation.
  - Work is progressing with IT to expand ACR Connect to run size algorithm on localizer at site. Also working on AI/NLP solution for DIR Mapping.
- **Quality and Safety Conference:**
  - The conference theme was finalized as Redesigning Radiology. Registration is currently open, and 22 abstracts were submitted by the July 30th deadline.
- **Accreditation**
  - **MR**: MRI large medium phantom guidance document received CMS approval, MR medium phantom grace period document received committee approval.
  - **Peer Learning**: Minimum Peer Learning program requirements for accredited facilities approved by both the accreditation chairs and CMS. A webinar is planned for September 14, 2021, to introduce them.
  - **Validation Site Survey**: Virtual VSS email changes in database are completed, toolkit and surveyor forms updated and will begin assigning virtual surveys.
  - **UAP:** On May 25th, the Ultrasound Accreditation team presented a Webinar, ACR Ultrasound Accreditation Updates and Lesson Learned. There were over 1200 Registrants. The recording is available on the Ultrasound Accreditation website.

Q&S By the Numbers, July 2021

ACR Accredited Facilities | **National Radiology Data Registry** | **NRDR Exam Volumes**

Accreditation Program	Currently Active		Participating Facilities				2020	2021 YTD
	Facilities	Units		Active	Total			
Breast MRI	2,022	2,257	3D Printing	7	24	3D Printing Exams	90	711
Breast Ultrasound	2,483	--						
CT	7,323	10,467	CTC	29	170	CTC	18,880	19,534
MRI	7,252	9,541						
Mammography	8,497	22,770	DIR	2,299	3,205	DIR	115,661,257	127803,160
Nuclear Medicine	3,358	5,487						
PET	1,645	1,802	GRID	864	2,251	GRID	75,140,154	84,334,415
Stereotactic Breast Bx	1,619	1,836						
Stereotactic Breast Bx **ACS**	2	2	LCSR	3,416	4,960	LCSR	2,277,630	2,730,070
Ultrasound	5,437	--						
			NMD	435	990	NMD	33,135,006	35,554,710
Radiation Oncology	676	--						
			Total Unique	**4,779**	**7,261**			

- **Breast Imaging Center of Excellence Designees:** 1,184

- **Diagnostic Imaging Center of Excellence Designees**: 113 entities across 502 facilities
- **RADPEER Participants**: 890 groups with 18,931 physicians

Areas of Concern:

- **None**

Member Value:

- The activities of the Commission continue to improve and expand to support our membership in providing quality care to their patients and demonstrate the value that radiology brings to the healthcare system.

ACR Commission on Radiation Oncology

William Small, Jr., MD, FACR, FASTRO, FACRO, Chair

Commission Update:

- RO Commission Chair and Members continue to provide comments on various documents and endorsement responses, which enhances the visibility of radiation oncology in the ACR.
- RO Accreditation Program (ROPA) currently have 697 sites accredited and 84 under review. ACR has received 2 R-O PEER and 0 M-P PEER applications since July 2021.
    - Surveys continue to be virtual with plans to re-evaluate on-site visits in October 2021
    - Awaiting on VHA final decision for contract.
- RO Practice Parameters Committee continues to remain on target.

For the 2022 cycle, ARS accepted and agreed to collaborate. The three Parameters listed have their respective chairs and ACR representatives.

- ACR–ARS Practice Parameter for the Performance of Total Body Irradiation - Mike Reilly, PhD - Dr. Reilly is looking at the writing committee revisions and then we will recirculate the draft.
- ACR–ARS Practice Parameter on Informed Consent – Radiation Oncology - Mark Hurwitz, MD – received comments from writing committee and in the process of putting them together to re-circulate.
- ACR Practice Parameter on the Physician Expert Witness in Radiology and Radiation Oncology *General, Small, Emergency and/or Rural Practice (GSER) Chair is Candice Johnstone, and her committee is made up of various practice types and members. This received comments from the writing committee and we are in the process of putting them all together to re-circulate.

- ACR Commission on RO Chair and RO Education Group Lead is currently working towards continuing new educational programs and venues for radiation oncology to address radiation oncology member concerns and needs for information content that is more mainstream, diverse and reaches all generation types such as lively podcasts, more engaging webinars etc. Presentations, proposals and assessments and calls were provided to CoPPL .

Member Value:

- CARROS approved 13 applicants for ACR fellowship this year along with another honorary fellowship candidate to the awards and honors committee.
- RO Education Committee organized a well attended 1 hour RO program in conjunction with the 2021 ACR Annual Meeting Chaired by Dr. Arya Amini and Organized by Dr. Mark Mishra with the staff support of Theresa Powell.
- RO Education Leads Drs Amini, Laucis and Saeed have continued to develop new educational programs for ACR members about emerging technologies, treatment techniques and outcomes in the field of radiation oncology. To date, the ACR RO has provided the most ACR RO informational webinars utilizing hot topics, engaging many of the RO members and gaining the interest of non-members to join the College https://www.acr.org/Clinical-Resources/Radiation-Oncology-Resources/Webinars.

- Dr. Join Luh who is also the CARROS President and ACR Practice Parameters Co-chair has been elected the ACR Council Steering Committee representative for radiation oncology.
- ACR RO is hopeful to hold their RO Commission/Committees meetings in conjunction with the ASTRO Annual Meeting in Chicago (networking engagement, meetings, informative sessions and ROPA exhibit booths).

RO RFS rep continues to foster more collaborative initiatives between Radiation Oncology and Radiology:

- Continued monthly article for the ACR RFS Newsletters and on the ACR Resident and Fellows web page titles "Radiation Oncology Corner".
- Putting together a RO APM Update webinar for members.
- RO RFS has a formal partnership with the Association of Radiation Oncology Residents and plans to work on some didactics concerning a raget volume delineation & staging from combination from DX radiologist perspective to help with contouring.

*ACR Radiation Oncology continues to improve integration with other commissions and ACR staff to address common concerns by working to implement other specialties into the ACR Journal Advisor and engage with other professional societies and members of the College to draft/collaborate/endorse on various RO-related publications.

*The Economics Committee continue to work diligently on providing expertise and comments regarding the impact on radiation oncology reimbursement.

*ACR Journal Advisor (JA) continues to grow and acts as an avenue for ACR membership growth by marketing to new residents. Currently the JA has 4325 subscribers/17 new subscribers.

Commission on Research

Chair: Pamela K. Woodard, MD, FACR

Commission Update:

1. **ACR's National Clinical Imaging Research Registry™ (ANCIRR)** continues to grow in number of research registries, using the ACR Informatics platform, including TRIAD™ and ACR Connect™, for seamless data and image collection. ANCIRR is collecting case images and anonymized patient data from multiple practice settings to support scientific research, AI development and regulatory submissions across 14 different research registries. Participation is open to ACR members.
2. ACR's Research Role in Fighting COVID-19
    a. ACR COVID-19 Imaging Research Registry (CIRR) has multiple collaborations as well as a charge to independently create integrated datasets by leveraging CONNECT, DART and RAVE. The CIRR is led by a 30 physician member Steering Committee chaired by Sharyn Katz, UPENN. CIRR contains ~8,000 patient cases from three data contributing sites. Activities under the CIRR include:
        i. NIBIB Medical Imaging and Data Resource Center (MIDRC), funded at $20M over 2 years, consortium between ACR, RSNA and AAPM. The CIRR is a primary data collection pathway for MIDRC, which may become the largest COVID-19 medical imaging archive in the world, accessible to academic, industry and regulatory agency/government users.
        ii. ACR Imaging Partner to Society of Critical Care Medicine's Viral Infection and Respiratory Illness Universal Study Clinical Data Registry in COVID-19. ACR's Imaging Registry contains 3,500+ chest, neuro and cardiac imaging exams and growing.
        iii. ACR Imaging Partner to National Heart Lung and Blood Institute's Prevention and Early Treatment of Acute Lung Injury Network's COVID-19 Observational Study. ACR's Imaging Registry contains 4,000+ chest and cardiac imaging exams and growing.
        iv. Pursuing Centers for Medicare/Medicaid Services (CMS) Improvement Activities in contributing data to registries like CIRR to incentivize and expand site participation. Decisions on applications are expected in the Summer 2021.
3. The **ACR Fund for Collaborative Research in Imaging (ACR FCRI)** awarded two research project grants: creation of a liver imaging research registry (LIRR) leveraging other ACR products, ACR LI-RADS and ACR Assist's LI-RADS module, and a multicenter, randomized, prospective study to test the efficacy of a patient-centered educational intervention based on coronary artery calcification (CAC) information in cardiovascular risk factor modification of a cohort of patients enrolled in lung cancer screening (LCS) programs across the country.
4. The **Tomographic Mammography Imaging Screening Trial (TMIST)** has recruited over 52,000 women from 111 sites across the US, Canada, S. Korea and Argentina. 19% of women enrolled at US sites are African American. Work continues in the development of a

breast cancer modeling tool to provide individualized screening strategies using TMIST clinical, genomic, and pathomic data.

5. The new **IDEAS (Imaging Dementia: Evidence for Amyloid Scanning)** is open and recruiting patients at over 50 sites. The study has the goal of recruiting more than 50% of the sample size of the trial focused on Black/African American and Hispanic/Latinx populations. The goal of New IDEAS, in partnership with the Alzheimer's Association, is to determine whether using a brain amyloid PET scan helps clinicians provide a more accurate diagnosis and make better treatment decisions for patients with Alzheimer's disease and other types of dementia.
6. **DECAMP-1 Plus, Prediction of Lung Cancer Using Noninvasive Biomarkers** has enrolled over 100 patients at 13 sites, despite the pandemic and the impact on the thoracic community, with the goal of determining if biomarkers found through simple blood, stool and other tests could one day be used as tools to predict, diagnose or rule out lung cancer.
7. **Quynh-Thu Le, MD, FACR,** professor of radiation oncology at the Stanford University School of Medicine, was elected in June 2021 as Chair of the RTOG Foundation and appointed Group Chair of NRG Oncology. She assumed the role effective July 1, 2021 succeeding Walter J. Curran, Jr., MD, who resigned in January 2021 to assume the position of Global Chief Medical Officer of GenesisCare.
8. Founding RTOG Board Member & Current Treasurer Jeff Michalski, MD, FACR, FASTRO, elected **ASTRO President.**
9. Activated 2 new NCI trials through **NRG Oncology** with 17 NRG studies in development, 15 with NCI approval.

Areas of Concern:

None to note at this time.

Member Value:

1. Regular cross-communication by the Chair of the Commission on Research with the Chairs of various other Commissions, to include Radiation Oncology, Interventional and Cardiovascular Imaging, Pediatrics, Neuroradiology, Informatics, and Economics - in order to ensure complementary efforts, leverage shared priorities where they exist, and maximize member engagement and impact of efforts.
2. Research Committees and Projects allow member radiologists to develop and lead major programmatic research that drives new developments in clinical practice.
3. ASCO Presentations of ACR's radiation oncology research:
    a. NRG-RTOG 1106/ACRIN 6697: Phase IIR trial of standard versus adaptive (mid-treatment PET-based) chemoRT for stage III NSCLC.
    b. ANZGOG 0902/RTOG 1174/GOG 0274: Adjuvant chemotherapy following chemoRT as primary treatment for locally advanced cervical cancer compared to chemoRT alone: The randomized phase III OUTBACK Trial. Plenary presentation.

Commission on Ultrasound

Chair: Lauren Parks Golding, MD

Commission Update:

- Working with Quality and Safety Commission to assemble an informational summit including various stakeholders in organizations with existing or developing Point of Care Ultrasound (POCUS) programs.
- Working with MESO to develop ultrasound-focused videos to educate and expose medical students to ultrasound.
- Working with CoPLL to add Ultrasound as a specialty in the e-guide to radiology recently produced for medical students.

Areas of Concern:

Key areas of concern for the ACR, BOC, or profession moving forward include (please list in the order of importance):

- Prevalence of POCUS continues to be a primary concern
- Advocating for Ultrasound as a unique and relevant subspecialty within Radiology

Member Value:

Please describe how your current activities provide value to ACR members. Please note that the value may be to a particular demographic group (e.g., subspecialty, age, gender). Please ensure that the member value is easily understood by the rank-and-file member.

As a commission, we continue to advocate for Ultrasound as an essential part of the profession of radiology, both to ensure quality care for our patients who benefit from ultrasound in the hands of well-trained expert radiologists, and to ensure that the subspecialty is given the credibility and reimbursement pathways necessary to remain sustainable in the future. Our priorities are increasing trainee interest in Ultrasound, highlighting the unique work of radiologists performing ultrasound, and protecting ultrasound from scope of practice and policy changes that could threaten our patients' access the highest quality care.

Commission on Women and Diversity

Chair: Johnson B. Lightfoote, MD, FACR

Commission Update:

During the continuing covid pandemic, our Commission's activities have been largely constrained to virtual convenings, collaborations, meetings, publications, propositions and presentations. College professionals, volunteers and staff have fully exploited the virtues of virtualization in meeting the mission of our Commission.

ACR Pipeline Initiative for the Enrichment of Radiology Program

- Under the leadership of Program Chair Dr. Michele Johnson, and management of Commission Staff Jan Cox and Angelica Vergel de Dios, a 6 week virtual program was formulated and fielded during June and July 2021.
- The fourteen ACR PIER 2021 Scholars and 30 Preceptors met on Thursday evenings and Friday all day and presented a Grand Tour of the radiological professions for these rising second year URM and women medical students.
- Here are links to your ACR PIER Class of 2021 Scholars and a specimen agenda from one ACR PIER Thursday-Friday Class Meeting
- ACR PIER Scholars presented their Cases-in-Point before the National Medical Association Section on Radiology and Radiation Oncology, and spoke in a panel discussion recounting their summer experience, on 7/18/2021 at 6 pm EDT.

Presentations, Publications, Proposals and Panel Programs

- ***JACR* Special Edition on Health Disparities;** a synoptic paper continues in preparation, in collaboration with the Commission for Breast Imaging, for publication in JBI, November 2021.
- **ACR State Chapter Leaders in Diversity Colloquium,** 3/4/3021 at 4 pm PST, led by Dr. Gail Morgan.
- **AAWR Higginbotham Lecture: Diversity in Radiology: How; and Why?** 3/10/2020 at 4 pm PST, delivered by Dr. Johnson Lightfoote.
- **Historically Black Schools of Medicine Radiology Residency Programs: Contributions and Lessons Learned**, Birch, Spalluto, Chatterjee, Nguyen, Lightfoote, Morgan, Bradshaw, Bates, Spottswood, *Academic Radiology*, 7/13/2021, https://doi.org/10.1016/j.acra.2021.03.021.
- **Columbia University Carte Blanche Human Research Consent**, 3/25/21 at 3:30 pm PDT.
- **Family/Medical Leave for Diagnostic Radiology, Interventional Radiology, and Radiation Oncology Residents in the United States: A Policy Opportunity**, Magudia, Ng, Campbell, Balthazar, Dibble, Hassanzadeh, Lall, Merfeld, Esfahani, Jimenez, Fields, Lightfoote, Ackerman, Jeans, Englander, DeBenedectis, Porter, Spalluto, Deitte, Jagsi, and Arleo, *Radiology*, 4/13/2021, https://doi.org/10.1148/radiol.2021210798.
- **ACR 2021 Council Resolution 48:** Supporting Parental, Caregiver, and Medical Leave during Training, adopted by ACR Council as policy of the College, 5/27/2021.
- **ACR Statement Denouncing Anti-Asian Violence, Hate and Bias,** https://mobile.twitter.com/RadiologyACR/status/1374781044528922625, 3/24/2021.

- **ASNR Imaging of the Transgender and Gender Diverse Patients,** 3/31/2021 at 12 noon PDT, led by Drs. Bobbi Dalley, Justin Stowell, Evelyn Carroll.
- **Vanderbilt University Department of Radiology: Diversity, Equity and Inclusion Week,** Panel on the History of Underrepresentation of Minorities in Radiology, 7/21/2021, Dr. Johnson Lightfoote.

Workgroup on Gender Diversity:

- The Workgroup has completed analysis of the ACR Practice Parameters, and document revision recommendations have been completed. The next step requires separating, with the assistance of ACR General Counsel, those recommended revisions into trivial editorial changes, as opposed to changes requiring Council approval; this step remains a work in progress.
- Vaz Zavaletta, M.D., will assume leadership of this workgroup.

Areas of concern:

- The PIER program will require additional financial resources, specifically additional stipends for the expanded enrollment, and economic support for the administrative staff. Significantly, the professional program manager's academic time (Dr. Johnson) should be funded by ACR as a fractional physician FTE, like other research and education positions. Costs will change significantly when the previous in-person costs of travel, housing, and meals expenses start again, perhaps in 2022. In continuation, management of webinars, online resources, and convocations will require additional staff support.

Member value

- The activities above directly support the College's mission and commitment to improve diversity, equity, and inclusion of the radiological professions, in service to our patients, populations and practices.

American Roentgen Ray Society

Reginald F. Munden, MD, DMD, MBA ARRS Representative

Organization Update:
ARRS completed a most successful virtual meeting in April due to ongoing restrictions related to the global COVID-19 pandemic. The virtual program featured 97 live sessions and 50 pre-recorded sessions. More than 2,900 attended the virtual meeting over the meeting dates. The program offered more 147 CME credits and 110 self-assessment credits.

Planning for the 2022 annual meeting, May 1-5 in New Orleans, LA, is well under way. The two categorical courses will be "Tumor Imaging: From Screening to Response Assessment" and "Stems to Sternum: Sports Imaging Inside and Out". As part of the society's expanding Global Partner Society (GPS) program, a special program titled "Brain Tumors: From Child to Adult" will be presented by faculty from ARRS and 2022 GPS Global Exchange Partner the Spanish Society of Medical Radiology (SERAM). In addition, ARRS is pleased and honored that the Society of Head and Neck Radiology will present a featured course.

Future confirmed annual meeting dates are:

- 2022—May 1-6, New Orleans, LA
- 2023—Dates and location TBD
- 2024—May 5-10, Boston, MA
- 2025—April 27-May 1, San Diego, CA

The society is also currently accepting registrations for two virtual symposium Pediatric Imaging September 8-9 and Abdominal MRI September 9-10.

The Roentgen Fund continues to grow and support promising future leaders in radiology. The following recipients of ARRS scholarships and fellowships were introduced at the 2021 virtual meeting:
2021 ARRS Scholar
Camilo Jaime's, MD
Boston Children's Hospital; Harvard Medical School

2021 ARRS Scholar
Tatiana Kelil, MD
University of California, San Francisco

2021 Figley Fellowship in Radiology Journalism
Omer Awan, MD, MPH
University of Maryland School of Medicine

2021 Rogers Fellow International Fellowship in Radiology Journalism
Francesco Giganti MD
University College London

American Radium Society

Chair: Andre Konski, MD, MBA, MA, FACR

Organization Update:

Please list in the order of importance, activities, new initiatives, or accomplishments that the Board of Chancellors (BOC) should be made aware of since the last time the activity was reported.

- **Annual Meeting**
  The Society is preparing for a live meeting Sept 29-Oct 4 at Hyatt Regency Maui. The theme of the meeting is "Selection, selection, selection … Who should get …? A near-record number of abstracts were submitted. Attendance numbers are still uncertain due to limitations on travel but likely to be moderate to good.
- **Executive Committee**
  The incoming new President is James Metz from the University of Pennsylvania with Kelly Hunt from MD Anderson Cancer Center serving as President-Elect.
- **Appropriate Use Criteria Committees (AUC)**
  The AUC committees have presented four educational webinars (Thoracic x2, Gastrointestinal, CNS) for Self-Assessment CME with two more (Gastrointestinal, Lymphoma) to be held in the coming weeks. The nine committees are continuing to work on 2-3 topics per committee with additional ones currently pending publication.

Areas of Concern:

Key areas of concern for the ACR, BOC, or profession moving forward include (please list in the order of importance):

- ARS has added additional online educational programming to address the uncertainty regarding in-person meeting attendance.

Member Value:

Please describe how your current activities provide value to ACR members. Please note that the value may be to a particular demographic group (e.g., subspecialty, age, gender). Please ensure that the member value is easily understood by the rank-and-file member.

- The Society has added an additional benefit to its members with the addition of the American Journal of Clinical Oncology (AJCO). The AJCO now serves as the official journal of the ARS.

Summer 2021 — Interim Report

Committee on Awards and Honors

Carol M. Rumack, MD, FACR, Chair

Committee Update:

Due to the COVID-19 pandemic, the Awards and Honors Committee members met via a virtual Zoom meeting on Monday, July 26, 2021. The purpose of the meeting was to review the nominations for the Gold Medal and Honorary Fellow Awards. The committee's nominee selections for the 2021 awards will be recommended for consideration by the Board of Chancellors at the upcoming fall meeting.

Areas of Concern:

There are no areas of concern at this time.

Member Value:

- Through the three award categories, individuals are recognized who have provided extraordinary service to the College, preeminent contributions to radiology and actions at the national level to support the efforts of the College.
- Once awardees are selected, an avenue is provided through Convocation to recognize the awarded individuals for their efforts to further the profession of radiology and the College.
- Identifying awardees in the named categories provides young professionals an identified individual to aspire to.
- The result of the work performed through Awards and Honors promotes the practice of radiology by publicly awarding those who are the pinnacle of the profession as defined within the three separate award category's criteria.
- Members and/or Fellows can directly participate in the following manor:
    - Any member or fellow of the College can make a nomination for the Gold Medal. Any member or fellow may contribute supporting letters of the nomination as well.
    - Any Fellow of the College can make a nomination for Honorary Fellowship. Any fellow may contribute supporting letters of the nomination as well.
    - Any member of the College can make a nomination for the Distinguished Achievement Award. Any member may contribute supporting letters of the nomination as well.

Council Steering Committee

Amy Kotsenas, MD, FACR, Speaker
Timothy Crummy, MD, FACR, Vice Speaker

Committee Update:

- ACR 2021 was held virtually in May. The meeting included caucus meetings, leadership reports, the Presidential Address and Moreton Lecture, ACR, RFS and YPS elections, a virtual Convocation, education sessions, a virtual Capitol Hill Day and consideration of resolutions.

- We received 275 evaluations, representing about 1/3 of attendees. Many positive comments were received for how the meeting was run, for the added content and for improvements to the virtual platform. A CSC Work Group will provide a more detailed review of the evaluation data.

- Videos and reports from ACR 2021 are available online - https://www.acr.org/Lifelong-Learning-and-CME/Meetings-and-Course-Calendar/ACR-Annual-Meeting.

Connecting with the Council:

- As part of planning for ACR 2021, the CSC again hosted Council Town Halls to share information, answer questions and prepare Council members for the meeting. Strong attendance and positive feedback on the Town Halls continued to show that this approach to engaging with the Council is effective. The CSC will identify additional opportunities to host Town Halls and will continue to utilize the Council Community on Engage to share information and get feedback on CSC activities and issues that impact our members.

Priorities for 2021-2021:

- The Speaker and Vice Speaker have outlined several priorities for 2021-2022; staff has collected preferences and assigned members to work groups to support the work outlined below.

  Annual Meeting – Chair: Matt Hawkins, MD
  - Review evaluations from the 2021 annual meeting
  - Summarize comments and make recommendations
  - Recommend plans for the ACR 2022 annual meeting program

  Communications – Chair: Madelene Lewis, MD
  - Planning Council Town Halls
  - Coordinating council communications, including news blasts and Bulletin articles

  Digest of Council Actions Update – Chair: Taj Kattapuram, MD
  - Review existing Digest of Council Actions content and format
  - Suggest changes to make the document more interactive, timely, and valuable

Resolution 1 Workgroup – Chair: Derrick Siebert, MD

- Manage the referred resolution from ACR 2021, ACR Practice Parameters and Technical Standards Refresh

Resolution 2F– Chair: Kurt Schoppe, MD

- Manage the referred resolution from ACR 2021, Medical Staff Privileges, Exclusive Contracts & Economic Credentialing

CSC Liaison Outreach

CSC members have received their liaison assignments and been provided with resources to initiate their initial outreach as liaisons to chapters and societies. Resources have been developed for this purpose and shared with the CSC via their closed community on Engage.

Practice Parameters and Technical Standards:

CSC members have been assigned as chairs and co-chairs for reconciliation committees for the documents that will be presented at ACR 2022. Field review for the Practice Parameters and Technical Standards began in August, with the first set of documents available on August 23. The complete schedule and information is available online – https://www.acr.org/Clinical-Resources/Practice-Parameters-and-Technical-Standards/Field-Review.

Sunset Policy Review:

The 10-year sunset policy review has begun. All commission chairs and staff received by email the 38 policies that are up for review in 2022. Recommendations were due to staff by August 20th. A response is requested by all commissions to ensure that everyone has participated in the review, a response of no comment is appropriate if you don't have a recommendation to renew, to renew with amendment or to sunset.

Responding to Member Concerns

The Speaker and Vice Speaker, along with members of the CSC, have been engaged in activities to address member concerns regarding MARCA and non-physician radiology practitioners. A Town Hall was held in August and a member survey is in development.

Areas of Concern:

A significant amount of time has been spent addressing controversial issues and responding to member concerns; a more proactive approach to addressing potentially controversial issues would be beneficial to ensure that member and staff time is utilized effectively.

Member Value:

The activities of the CSC provide value to ACR members by providing a representative voice for the membership, enhancing communication between ACR leadership and chapter leadership and providing opportunities for involvement in the policy-making process and development of Practice Parameters and Technical Standards.

Board Self-Evaluation Committee

Chair: William Small Jr., MD, FACR

Committee Update:
A feedback survey was sent to participants of the Spring BOC & CSC Meeting, which was held virtually on May 15, 2021. 30 participants provided their feedback to the logistics and content of the meeting.

- Positive feedback was received on the following:
  - Excellent reports from the various commissions and taskforces.
  - Taking the time to discuss thorny issues related to the budget.
  - Range of content in topics covered.
  - Excellent time management.
- Suggestions for improvement included:
  - Virtual meeting format doesn't allow for networking.
  - Provide discussion time immediately following each report.
  - Provide more time to discuss strategic ideas.

A feedback survey was sent to participants of the July Orientation Meeting, which was held virtually on July 12, 2021. Eight participants provided their feedback to the logistics and content of the meeting.

- Positive feedback was received on the following:
  - Overall quality of the meeting
- Suggestions for improvement included:
  - Provide breakout sessions for more interactivity
  - Do not duplicate pre-meeting and meeting materials

Areas of Concern:
In the Spring meeting evaluation, some Board members expressed concern regarding the role of the Budget & Finance Committee as it relates to the BOC.

Member Value:
ACR leadership uses feedback from surveys in order to improve the quality and content of board meetings. Commission and committee reports, strategic discussions between the BOC and CSC, and decisions made are all vital to membership and the College as a whole.

Summer 2021 Interim Report

Intersociety Committee

Jonathan B. Kruskal, MB, ChB, PhD, FACR, FSAR (Chair)

Committee Update:

- **2021 Summer Conference:**
  - The August 5-7, 2021 in-person Summer Conference has been rescheduled for August 4-6, 2022 at the Chateaux Deer Valley in Park City, Utah.
  - The Committee is exploring the option of offering webinars on current topics to society members later in the year. Health equity is a possible option.

Areas of Concern/Discussion:

The continuing uncertainty surrounding the COVID-19 pandemic makes it difficult to plan for the future.

Member Value:

The activities of the Intersociety Committee provide a valuable forum for radiology organizations to discuss topics of mutual interest and to keep abreast of cutting-edge ideas that improve the body of knowledge and practice of radiology.

Summer 2021 — Interim Report

Journal of the American College of Radiology (JACR)

Chair: Ruth C. Carlos, MD, MS, FACR

Activities, new initiatives, and accomplishments:

- Submission numbers and turnaround times continue to improve in key areas valued by contributors:
  - JACR received 343 submissions March-July 2021.
  - The acceptance rate was 29% for all papers excluding special issues (which are typically solicited) and ACs.
  - The time to first decision fell to 7.5 days with the implementation of a new editorial system.
- The JACR impact factor has risen 33% this year, going from 4.268 to 5.532. JACR is now ranked 19 out of the 134 journals in our category (previously 20th).
- JACR continues to reward reviewers' contributions to the journal. In addition to offering CME credit for reviews, the journal awarded its second round of silver medals (for reviewers who have completed more than 50 lifetime reviews). With the rising number of submissions and matching volunteer efforts, we will be adding a Platinum level. The journal launched a quarterly reviewer dashboard email in April 2021.
- The journal migrated to the Editorial Manager platform for a more streamlined, intuitive author/reviewer experience. A follow-up survey will benchmark the new author experience against results of the survey during the 2020 author audit.
- The journal joined a growing initiative in scholarly publishing to simplify the initial submission process. A pain point for authors was resolved with the implementation of DocuSign for conflict of interest forms.
- Two Hillman Fellows in Scholarly Publishing have been selected for 2021. Tara M. Catanzano, MD, and Ryan K. Lee, MD, will join us in the fall to kick off their fellowship.
- Topic-specific issues were as follows:
  - The March Failing Up Special Issue took on failure as an essential component of growth.
  - The May Appropriateness Criteria supplement gathered updated AC topics.
  - The May Wellness focus issue tackled a topic of great concern to medicine.
  - The June focus issue on Private Practice amplified the journal's outreach to this segment of the membership.
- Upcoming focus issues include Resilience and Well-Being, Science of Medical Education, and Care Transformation. The Nov. special issue will cover Health Equity.
- JACR content continues to perform well with readers both inside the organization and in the broader medical community. On JACR.org (access mainly by members), article views totaled 53,859 March-July, with 48,500 unique visitors.
- A trainee outreach initiative kicked off this year and will begin with establishing a trainee editorial board (with applications due Aug. 31).
- JACR continues to innovate in the social media space, with robust presence on Twitter, LinkedIn, and Instagram. #JACR tweet chats reached 6.4 million impressions March-July and connect the journal and specialty with stakeholders throughout healthcare.

Areas of Concern:

Key areas of concern for the ACR, BOC, or profession moving forward include (please list in the order of importance):

- Maintaining our first mover advantage in content recruitment and impact as new, competing journals enter the arena with overlapping scope (e.g., *Radiology: Artificial Intelligence*, *Radiology: Cancer Imaging*, *Healthcare: The Journal of Delivery Science and Innovation from AcademyHealth)*.
- Balancing the need to publish more rigorous science that supports the use of our content in payment and policy decision as well as a rising journal impact factor while presenting content of interest to the ACR member.
- Continual changes to Clarivate's impact factor calculation make the metric difficult to benchmark against previous years. The journal continues to rely on a variety of methods for measuring the success of the journal, including but not limited to the impact factor.

Member Value:

Please describe how your current activities provide value to ACR members. Please note that the value may be to a particular demographic group (e.g., subspecialty, age, gender). **Please ensure that the Member value is easily understood by the rank-and-file Member.**

- The JACR serves as a central node in ACR communications within the College and beyond. The editor-in-chief brings in commissions and other radiology experts through strategic outreach to commission leadership, silo-spanning selection of associate editors, diverse topics for special issues, and social media engagement across platforms and audiences. The result is a member resource that spans the work of the College and engages radiologists in advancing their specialty and caring for their patients.
- JACR publishes novel material that will help shape health care policy and the economics of imaging-related practice while remaining focused on delivering patient care efficiently and effectively.
- JACR offers SA-CME credit to both subscription holders and peer reviewers, the vast majority of whom are ACR members.

Commission on Research on *Harvey L. Neiman Health Policy Institute*

Chair: Pam Woodard, MD, FACR

1. **Advanced communications and thought leadership strategy aimed at increasing the visibility and impact of Neiman HPI research. Highlights of progress include:**
    - NHPI most recent work is summarized in spring/summer newsletter was released on June 22, 2021. Staged newsletter distribution expansion has expanded engagement with NHPI work with above benchmark open/click rates among a larger, active ACR member population.
    - Executive Director, Elizabeth Rula, PhD, authored *Research Rounds* column titled "Opportunities for Equity in Imaging" in the May 2021 ACR Bulletin.
    - AIRP-HPI Comparative Effectiveness Research virtual training courses were held on February 8 – March 5 and March 15 – April 9, 2021.
        - Dr. Rula presented Health Policy Research: Current Topics, Resources & Data at the live seminar on March 30, 2021.

2. **Extended agreements to fund NHPI research via the IMPACT Center at Emory University and HEAL at Georgia Tech for two years.**

3. **Presented NHPI go-forward strategy in a special session of the ACR BOC and CSC on June 29, 2021.**

4. **Seven new HPI studies were published:**
    - Study Highlights:
        - A joint study with the ACR's NMD Committee, published in Radiology, identified radiologist characteristics that predicted interpretive performance across metrics in screening mammography. *[Summary]*
        - A review in Radiology found that legislation for surprise billing may decrease in-network reimbursement. *[Summary]*
    - Developmental hip dysplasia and hip ultrasound frequency in a large American payer database, *Clinical Imaging*.
    - Evolving Radiologist Participation in Medicare Shared Savings Program Accountable Care Organizations, *JACR. [Summary].*
    - Longitudinal changes of financial hardship in patients with multiple sclerosis, Multiple Sclerosis and Related Disorders.
    - Secondary Interpretations of Diagnostic Imaging Examinations: Patient Liabilities and Out-of-Pocket Costs, *JACR. [Summary].*
    - Spinal Cord stimulation trends of utilization and expenditures in fee-for-services, *Pain Physician*.

Areas of Concern:
N/A

Member Value:

1. The thought leadership strategy bolsters member value via accessible evidence-based insights to inform health policy and implications for radiology practice.
2. Extended agreements with NHPI academic research centers ensure continuation of our robust, independent health policy research in support of the ACR strategy and advocacy efforts.
3. New publications bolster our portfolio of peer-reviewed studies that inform health policy and radiology practice decisions and provide actionable insights and implications of health policy for radiology practices.

Strategic Planning & Compliance Committee (SPCC)

Chair: Ramesh Iyer, MBA, MD

Subcommittees: CME and SAM Compliance; Measurement and Assessment

Update:

- SPCC Update:
  1. Due to the ACCME's new Standards for Integrity and Independence in Accredited Continuing Education that replaces the Standards for Commercial Support, an update to the P&P Manual and Forms will be required. This work continues through Q3 of 2021 with finalization and implementation in Q4 2021. The ACR must be compliant with the new Standards by January 1, 2022. The SPCC is poised to do the final annual review as outlined in the manual.

  2. The Royal College of Physicians and Surgeons of Canada Collaboration continues. Since the last report, 12 additional Education Center activities have been added under this agreement to offer Section 3 MOC credit to Canadian Fellows.

  3. The ARRT annual report was submitted and approved on July 31, 2021. ACR currently hold recognition status with the ARRT to offer Category A credits to Technologists.

  4. The ACCME reaccreditation effort will kick-off in November 2021, with final materials due to the ACCME by July 2022. The ACR CME Compliance team, in consultation with the SPCC and other key ACR stakeholders will begin strategic planning meetings through the reaccreditation process to highlight areas of update or inclusion to meet the ACCME's new commendation criteria. Additionally, as part of the reaccreditation effort, a 2021 Program Analysis will be conducted for inclusion in the application. The SPCC will be involved in this program analysis and will ensure the CE mission statement is current and being met by the accredited CE created by the ACR.

- **Measurement & Assessment Subcommittee Update, Daniel Karolyi, MD, PhD (Chair):**
  The Measurement & Assessment Subcommittee had six members roll off the subcommittee due to term limits and were replaced with new members in June 2021. The current roster includes ten active members, with inclusion of the chair. The subcommittee finalized and approved the intent-to-change practice question on the CE accredited evaluation tool. This finalized evaluation is included in the updated CE program Policies, Procedures and Forms with final approval by the SPCC and roll-out to take place by Q4 2021. The subcommittee is finalizing the data evaluation assignment by the AIRP and will send to the SPCC for finalization in Q3. The subcommittee has tentative plans to meet in September 2021.

- **<u>CME & SAM Compliance Subcommittee Update, Julie Bauml, MD (Chair):</u>**
  The subcommittee on CME and SAMs Compliance is highly active in the review of newly launched and renewed accredited CE activities. The subcommittee replaced 18 members, including the chair, this appointment cycle. The annual accredited CE Reviewer training will be conducted for new and continuing members.
- **Accredited CE activities (March – July 2021):**
  - 52 accredited CE activity applications received.
  - 93 accredited CE activities compliantly launched.

Areas of Concern:

Key areas of concern for the ACR, BOC, or profession moving forward include (please list in the order of importance):

- N/A

Member Value:

Please describe how your current activities provide value to ACR members. Please note that the value may be to a particular demographic group (e.g., subspecialty, age, gender). Please ensure that the member value is easily understood by the rank-and-file member.

- The SPCC in collaboration with the CME and SAM Compliance Subcommittee, Measurement and Assessment Committee and the ACR Accredited Provider Unit seeks to improve quality and results in radiology through the education needs of ACR members. ACR's accredited CE educational aim is to include clinical subject matter focusing on research, medical education and other content to improve practice and quality patient care. Each program is designed to achieve measurable results for radiologists.
- The SPCC oversees the accredited CE program as a whole, participating in the annual program analysis, annual policies and procedures review and review and/or update of the accredited CE mission statement.