AMYLOID IMAGING
OVERALL GOAL: INCREASE APPROPRIATE UTILIZATION FOR AMYLOID IMAGING FOR PATIENTS WITH DEMENTIA.

Referring Physician
Increase awareness among neurologists, family practitioners, and psychiatrists about these newly available agents, and what they are appropriate

Target organizations are the Alzheimer’s Association, American Academy of Neurology, American Association of Physicians, the American Psychiatric Association, Association for Frontotemporal Dementia, Association for Lewy Body Dementia

Initiate a variety of activities with these target organizations, including:
- Articles/info in their publications
- Joint educational sessions with target groups that ensure discussion of clinical application
- Free on-line CE courses for their members

Augment Website and electronic tools (PETPros) to include references, bibliography, image library, fact sheets, basics of why/how it is used, templates and tools (e.g., brain scan database), reimbursement information, and guidelines and CER info when available

Patient/Consumer Outreach
Develop patient website with dedicated page on brain imaging

Drive traffic to web site through Google ad words

Site will contain a basic set of informational materials, including:
- Fact sheets, PowerPoints, on-demand lectures, “canned” articles
- FAQs and “ask your doctor” Q&As
- Reimbursement information

Work with the Alzheimers Association to provide informational webinars, web site content and linking; materials and speakers for meetings

Market Speakers Bureau Amyloid Imaging experts to patient groups

Send Press Releases and information to referring physician media outlets and standard media lists

Healthcare Economics
Development of appropriate use criteria

Development of practice/procedure guideline

Create and maintain the SNM e-community for reimbursement and coverage issues

Education
Provide educational cases/testing and re-testing

- 10 teaching
- 10 assessment
- 10 re-assessment

Create and maintain the SNM e-community for reimbursement and coverage issues

Outcomes will be measured using the following data:
- Number of Participants
- Scores from Webinar, CE course and workshop pre- and posttests
- Scores from LSSAP module
- Scores from each set of 10 cases

Advocacy
Incorporate reimbursement and value information in advocacy materials for relevant stakeholders

Advocate value of technology/procedures with relevant stakeholders

Maintain and enhance FDA, CMS and Capitol Hill contacts

Outcomes will be measured using the following data:
- Amyloid Imaging procedure guideline for physicians - 2012
- Development of Appropriateness criteria - 2012
- Better educated stakeholders (Members, FDA, CMS, Capitol Hill, Payers) 2011/2012

Outcomes:

- Creation of a new SNM patient web site containing a full complement of patient-oriented materials on neuro/amyloid procedures, research, and reimbursement information
- Number of hits on the patient web site.
- Increase in awareness by target group members as measured by an electronic survey. This outcome depends on the willingness of the AA and AAN we have established relationships with groups and obtain permission to poll groups’ memberships
- Number of downloads of free CE content.
- Quality and participation in sessions at key target organization meetings.

OUTCOMES

OUTCOMES

OUTCOMES
Outreach

To fully achieve the potential of amyloid imaging to improve patient care, it is crucial it is understood and valued by external groups including the medical, patient advocacy, scientific, regulatory, legislative and funding communities. The support of these communities will assist in achieving clinical acceptance, utilization, and reimbursement for this new molecular imaging technology. SNM has created a multi-faceted outreach program that utilizes a variety of tools and methods to reach the imaging community, referring physicians, patient and consumer groups, and regulators and legislators. Our outreach plan is designed to:

- Increase knowledge among referring physicians about amyloid imaging
- Educate and prepare patient advocacy groups to be powerful allies in advancing the value of amyloid imaging
- Raise awareness and deepen understanding among administrative decision makers to balance the call to reduce care with an understanding of the benefits of this new technology

To meet these goals, we will be enhancing our existing relationships and developing new partnerships with relevant societies and patient organizations. We will engage/designate member ambassadors for these groups to pursue opportunities including joint educational symposia, webinars on key topics of interest, podcasts on key issues, educational materials, and joint sessions. We will augment our speaker’s bureau with amyloid imaging experts. Existing print and web content will be inventoried and enhanced for each audience. Medical and scientific evidence will be identified, compiled, and augmented when possible. Educational programs, evidence, reference materials and other tools will be packaged via our online portal similar to PET Pros for maximum utility by physicians. Patient and consumer information will be updated on the new lay-oriented website, www.DiscoverMI.org. SNM has already engaged our Patient Advocacy Advisory Board as a partner on this issue.

ACTIVITIES TIMELINE

SNM has established a good relationship with the Alzheimer’s Association (AA) over the past several years. We have done booth swaps and the group is represented on SNM’s new Patient Advocacy Advisory Board (PAAB). Over the next six months, SNM will work to expand on this relationship to develop a true collaborative partnership. SNM and the AA have already discussed developing a proposal for a “focused topic session” on amyloid imaging at the ICAD meeting in 2012. SNM has invited representatives and/or patient designees from AA to participate in the MI Summit on Dementia Imaging at the January 2012 Mid-Winter meeting. Additional activities include developing articles for their publication, augmenting material on their website, and marketing of our amyloid imaging experts via our Speakers Bureau.

Also during the next six months, SNM is developing a lay-oriented webinar on brain and amyloid imaging that builds on a presentation given at the 2011 SNM Annual Meeting to PAAB members. SNM will work with the AA to market the free webinar.

SNM is developing a patient website that will contain dedicated web pages on brain, heart, and cancer imaging. The site, www.discoverMI.org is scheduled to go live within the next three months and to contain comprehensive content within the next six months. SNM will actively promote the microsite through the web, Facebook, Twitter, and other social media and continue to drive consumer and patient traffic to the site.

Over the next 12 months, SNM will begin further engagements with other patient groups with an interest in amyloid imaging (including the Michael J. Fox Foundation and the Alliance for Aging Research, LEAD [Leaders Engaged Against Alzheimer’s Disease]) and independent key patient web-sites [e.g., breastcancer.org; endocrineweb.com, mayoclinic.com].

SNM submitted a proposal for a session at the American Academy of Neurology (AAN) meeting in 2012. The program proposes to bring together experts from a variety of disciplines and representatives of families and the insurance industry to discuss the potential of amyloid PET imaging to improve the quality of care for patients with neurocognitive disorders. The proposed program will include nuclear medicine physicians knowledgeable about the technical aspects of amyloid imaging and communicating with referring physicians, neurologists involved in the day-to-day care of patients with neurocognitive disorders, a member of a family with familial Alzheimer’s disease to provide the perspective of what patients want and don’t want, an insurer familiar with setting standards of evidence for coverage, and a bioethicist to discuss the ethical issues involved in amyloid PET imaging asymptomatic individuals. Over the next six months, SNM will work to publicize this session at AAN, if it is accepted. If it is not accepted, SNM will pursue other avenues to present this information at AAN 2012, including a satellite session, and address reasons why the proposal was not accepted. Over the next six months also, SNM will pursue relationships with other physician groups: American College of Neurology (ACN), American Society of Neuroradiology, the American Society of Neurology, the Association for Frontotemporal Dementia, the Association for Lewy Body Dementia, the American Academy of Family Physicians, and the American Psychiatric Association.

SNM intends to identify several key CE lectures to offer to the aforementioned physician groups on a complementary basis. SNM will also offer to develop articles for their publications and submit content on amyloid imaging for their websites.

OUTCOMES

Outcomes will be measured using the following data:

- Creation of a new SNM patient web site containing a full complement of patient-oriented materials on neuroamyloid procedures, research, and reimbursement information
- Number of hits on the patient web site.
- Increase in awareness by target group members as measured by an electronic survey. This outcome depends on the willingness of the AA and AAN we have established relationships with groups and obtain permission to poll groups’ memberships
- Number of downloads of free CE content.
- Quality and participation in sessions at key target organization meetings.

Advocacy

The following activities on amyloid imaging fall within the SNM HPRA 2011 goals of Appropriate and Adequate Reimbursement for Drugs and Procedures and Appropriate Pathways for New Product Approvals. The advocacy/healthcare economics activities focus on generating clinical evidence and data which will serve as the basis for advocacy and educational materials highlighting the value of amyloid imaging. While the primary target of the advocacy is government stakeholders, the evidence/data generated will also be used in the education of physicians, patients and other stakeholders.

TIMELINE

2011

SNM submitted comments to the FDA encouraging them to consider
the benefits of amyloid imaging and pledging our assistance in the education of prescribing physicians on the uses and benefits.

SNM will begin to incorporate reimbursement and value information in advocacy materials for relevant stakeholders. With appropriate messaging and materials, SNM will be able to advocate, on an ongoing basis, the value of the new diagnostic test with relevant stakeholders. As part of any government relations program, SNM will maintain and enhance FDA, CMS, and Capitol Hill contacts.

SNM already has a Coding Corner on its website. It will be modified so as to include coding/reimbursement information to relevant external audiences such as government and non-government payers.

2012
Upon approval of the first amyloid imaging drug by the FDA, SNM will incorporate amyloid imaging in its new program to develop evidence and appropriate use criteria.

SNM will develop a practice/procedure guideline. The SNM Guideline Committee will assign amyloid imaging to a new task force. In addition to the task force, the draft guideline will also be reviewed by the Brain Imaging Council and will be opened up for comments from the general membership.

OUTCOMES
• Amyloid Imaging procedure guideline for physicians - 2012
• Development of Appropriateness criteria - 2012
• Better educated stakeholders (Members, FDA, CMS, Capitol Hill, Payers) 2011/2012

Education
The purpose of the education program on amyloid imaging is to educate healthcare professionals, both SNM members and non-members, by increasing their medical knowledge, providing training on performing amyloid imaging procedures and improving competence and performance in interpreting and reporting these studies. The education model includes didactic, interactive, teaching, assessment and re-assessment activities. Specific components include a Webinar, courses presented at the SNM Mid-winter and Annual Meetings, courses at chapter meetings, workshops in conjunction with other societies and organizations, a self-assessment module, and interactive cases using DICOM images.

A Webinar and continuing education courses at the major SNM meetings will cover the basic principles, techniques, indications, interpretation and reporting of amyloid imaging procedures. These didactic activities will be recorded for online viewing as well as to produce online didactic activities. The self-assessment activity will be a module in SNM’s Lifelong Learning and Self-Assessment Program (LLSAP). The module will incorporate DICOM images, syllabus and questions. Utilizing these DICOM images in a case-based activity that replicates the actual practice environment, participants will assess and re-assess their competence and performance in performing, interpreting and reporting amyloid imaging studies. The first set of 10 cases will provide instruction, the second set will be an assessment and the final set will be a re-assessment.

The data generated from all of the activities in the program will provide data demonstrating level of knowledge, improvement in competence and performance, as well as comparisons among participants and across institutions. The data will also evaluate the overall program and provide an evidence-based resource that can be used in an online portal similar to PET PROS and publications.

TIMELINE
During the first 6 months of the program, the didactic activities will be developed. The Webinar and a course at the SNM Mid-Winter Meeting will be the first didactic activities. Planning will begin for courses at the SNM Annual Meeting and chapter meetings. Collaborations with other societies, such as RSNA, and other organizations will begin to plan further courses and workshops. A Lifelong Learning and Self-Assessment Program (LLSAP) module will be developed. It is anticipated the LLSAP module will consist of content captured from the Webinar or the Mid-Winter Meeting course. In addition, the 30 cases will be in development, starting with the 10 interactive teaching cases, followed by the 10 assessment cases and the 10 re-assessment cases.

During the remainder of the first year, the didactic activity at the SNM Annual Meeting will continue, the LLSAP module will launch and the cases will be completed. The online activities will have a 3-year CME lifespan. Live activities will be ongoing with annual courses and workshops occurring until the education need has been met. A live version of the interactive cases will also be developed by the 2013 SNM Mid-winter Meeting.

OUTCOMES
Outcomes will be measured using the following data:
• Number of Participants
• Scores from Webinar, CE course and workshop pre- and post-tests
• Scores from LLSAP module
• Scores from each set of 10 cases

Scores collected from the initial Webinar, courses and workshop posttests will provide a benchmark that identifies the current level of knowledge as well as the knowledge gaps. The LLSAP module scores will allow for comparisons between the pre-education data and the post-education data. Scores from the first 10 cases will provide additional data to compare against the pre-education benchmark. The second set of cases, the second assessment portion of the education program, will provide data that will analyze the success of the education program; i.e., compare the pre-education with the post-education results. The final set of cases, the re-assessment portion of the program, will allow comparisons against the pre-education benchmark and the assessment data. Using these score reports, the success of the program and the knowledge, competence and performance improvement measures can be obtained.
DOSE REDUCTION

OVERALL GOAL: PROVIDE INFORMATION AND GUIDANCE REGARDING RADIATION DOSE AND ITS RISK AND REDUCTION TO IMAGING PROFESSIONALS, REFERRING PHYSICIANS, AND THE PUBLIC.

Referring Physician

Increase awareness of the benefits of molecular imaging and put radiation risk in perspective for the cardiology, neurology, oncology communities, as well as among family physicians.

Continue to incorporate dose and safety messaging in SNM outreach materials—both print materials and on-line resources.

Website information to include references/bibliography, fact sheet on safety.

Distribute press releases and information to referring physician media outlets and standard media lists.

Patient/Consumer Outreach

Increase awareness among patients/consumers about the benefits of molecular imaging, activities aimed at dose reduction, and put radiation risk in perspective.

Develop patient website that includes safety information, risk/benefit information.

Site will contain a basic set of informational materials, including:

- Fact sheet, “canned” article
- FAQs

Drive traffic to web site through Google ad words.

Education

Provide educational Cases/testing and re-testing.

Hold CE courses at AM, RSNA and MWM.

Captured courses at AM and MWM and create online lectures.

Develop self-assessment activities.

Develop MOC Part IV projects to assess and re-assess practice performance.

Advocacy

Continue to incorporate dose and safety messaging in SNM advocacy materials.

Maintain a lead role in the Alliance for Quality Medical Imaging and Radiation Therapy promoting the CARE Act on Capitol Hill.

Emphasize importance of proper education in radiation dose reduction.

Maintain and enhance relationships at FDA, CMS, NRC, and on Capitol Hill.

Outcomes

Outcomes will be measured using scores from the live course pre- and post-tests, online course, the LLSAP module, and the PPAP project. Comparisons between the live and online course posttests and LLSAP module scores versus the PPAP project will measure the level of increased knowledge and competence resulting from the LLSAP module and project exercises. Comparisons between the assessment portion of the project (Stage A) and the re-assessment portion of the project (Stage C) will measure the improvement in competence and performance.

SNM solidified as radiation exposure experts.

Rational dose reduction policies.

Web content will be developed in the next year. Following this, numbers of hits will provide a reasonable outcome evaluative tool. Sessions developed and presented at other meetings will also provide an outcome source.
DOSE REDUCTION

Outreach
Issues surrounding radiation dose from medical imaging have been dominant in the media and on Capitol Hill over the past few years. Efforts to reduce radiation exposure during nuclear medicine and molecular imaging studies are ongoing and include the development of innovative hardware and software techniques and new imaging protocols, and other community-wide efforts such as Image Wisely and Image Gently. SNM is continuing its involvement with Image Gently and Image Wisely, and is creating a SNM task force that will work on a campaign regarding radiation exposure for radionuclide procedures. It is also essential to put the risks associated with radiation in context. SNM’s outreach program aimed at patients, referring physicians, and administrative decision makers will incorporate messages and information about radiation dose and risk, industry and society efforts to minimize radiation dose and, most importantly, the benefits of the procedures. In partnership with Image Gently, the SNM will be engaged in a publicity campaign to encourage nuclear medicine practitioners to follow the recently developed administered dose guidelines for pediatric nuclear medicine.

ACTIVITIES TIMELINE
Materials on radiation safety have been added to the SNM website. Lay oriented fact sheets that address the overall issue of radiation safety as well as those related specifically to MPI will be added to the new patient microsite, www.DiscoverMI.org over the next three months. Image Wisely and the SNM dose reduction task force will develop new web content in the next year.

Session on radiation dose/reduction has been proposed for the American Heart Association (AHA) meeting for 2012. Sessions on the same topic will be proposed for the American College of Cardiology (ACC) and the AHA meeting in 2013.

OUTCOMES
Web content will be developed in the next year. Following this, numbers of hits will provide a reasonable outcome evaluative tool. Sessions developed and presented at other meetings will also provide an outcome source.

Advocacy
Two of SNM’s stated 2011 advocacy goals relate to radiation exposure. SNM leadership and staff have been actively involved in activities at the NRC and on Capitol Hill relating to the I-131 patient release criteria and worker exposure levels. We have members who are experts on radiation safety, have publicly testified and have been interviewed by the media. Our new Government Relations Chairman is Dr. Munir Ghesani who lives in Princeton, NJ and works in New York City. In addition to practicing nuclear medicine, Dr. Ghesani is also his hospital’s Radiation Safety Officer. With increased media interest on radiation exposure and the recent Bracco generator recall, SNM is stepping up its efforts on messaging and advocacy. It is also essential in the context of radiation exposure to emphasize the importance of having appropriately trained individuals authorizing, performing and interpreting the studies. In this context, for example, the SNM strongly endorses the CARE Act. In addition to incorporating safety messaging in SNM advocacy materials, we continue to work on enhancing relationships at FDA, CMS, NRC, and on Capitol Hill.

TIMELINE
2011-2012
• SNM Communications to FDA for quick Bracco Generator Reso-
• Incorporate updated dose and safety messaging developed by several SNM expert committees (MIRD, RADAR) in SNM Advocacy materials. – 2011.
• Continue leadership in the Alliance for Quality Imaging and Radiation Therapy promoting the CARE Act on Capitol Hill – 2011/2012
• SNM leaders to meet with the NRC in the fall of 2011

OUTCOMES
• SNM solidified as radiation exposure experts
• Rational dose reduction policies

Education
The purpose of the education program is to improve patient safety. The education program will provide healthcare professionals, both SNM members and non-members with the information and tools they need to increase their knowledge regarding radiation dose and risk and improve their competence and performance in reducing radiation doses in imaging procedures. The education model will include didactic and interactive teaching activities as well as assessment and re-assessment activities. Specific activities include continuing education courses at the SNM Mid-winter and Annual Meetings, courses at chapter meetings, workshops held in conjunction with other societies and/or organizations, a self-assessment module, and a Maintenance of Certification Part IV project as part of the SNM’s Practice Performance Assessment Program (PPAP).

Continuing education courses at the major SNM meetings, chapter meetings and collaborative workshops will cover the basic principles and techniques for dose reduction in imaging procedures particularly in the context of cardiac and pediatric imaging. These didactic activities will be recorded for online viewing as well as to produce online didactic activities. The self-assessment activity will be a module in SNM’s Lifelong Learning and Self-Assessment Program (LLSAP). The module will incorporate images, syllabus and questions. Utilizing actual patient data, healthcare professionals will evaluate their competence and performance, develop their own improvement plan and re-assess their competence and performance.

The data generated from all of the activities in the program will provide data demonstrating level of knowledge, improvement in competence and performance, as well as comparisons among participants, group practices and across institutions. The data will also evaluate the overall program and provide an evidence-based resource that can be used in PET PROS and publications.

TIMELINE
A self-assessment module (SAM) course on dose reduction in pediatric nuclear medicine was held at the 2011 SNM Annual Meeting. The session was captured and included in the 2011 SNM Virtual Meeting, which is available to professionals now. An LLSAP module is already in development. During the first 6 months of the program, the continuing education courses will be developed, the LLSAP module will launch and a PPAP project will be developed. Collaborations with other societies and organizations will be pursued to plan further courses and workshops. The PPAP project will consist of tools to assist professionals in evaluating the doses they use in imaging procedures, measure those doses against the practice guidelines and recommended dose levels, and determine where improvement is needed in their practice. Project participants, individuals or groups, will then be guided in their efforts to develop a plan for improve-
ment. They will then re-assess their practice performance. The results will demonstrate whether improvement has been made.

During the remainder of the first year, the didactic activity at the SNM Annual Meeting will occur and courses and workshops will be held in conjunction with chapters and other societies/organizations. A case-based live workshop will be investigated. The online activities will have a 3-year CME lifespan. Live activities will be ongoing with annual courses and workshops occurring until the educational needs have been met.

**OUTCOMES**

Outcomes will be measured using scores from the live course pre- and post-tests, online course, the LLSAP module, and the PPAP project. Comparisons between the live and online course post-tests and LLSAP module scores versus the PPAP project will measure the level of increased knowledge and competence resulting from the LLSAP module and project exercises. Comparisons between the assessment portion of the project (Stage A) and the re-assessment portion of the project (Stage C) will measure the improvement in competence and performance.
CARiDAc IMAGING

OVERALL GOAL: INCREASE APPROPRIATE MPI UTILIZATION THROUGH INCREASING AWARENESS THAT MPI IS A SUPERIOR TEST THAT HAS WELL STANDARDIZED PROTOCOLS AND PROVIDES FOR OPTIMAL RISK STRATIFICATION FOR PATIENTS AMONG ALL MODALITIES. INCREASE AWARENESS OF RADIATION RISKS AND BENEFITS.

Referring Physician
Increase awareness among cardiologists, family practitioners, and internists about the evidence-based value of cardiac functional and molecular imaging procedures and put the issues of radiation into context.

Partner with American Heart Association, American College of Cardiology, the American Academy of Family Physicians and the American Academy of Physicians to:
- Place Articles/info in their publications
- Hold joint educational sessions that discuss radiation risk issue, benefits of procedures
- Provide free on-line CE courses for their members

Develop WebSite information to include references/bibliography of key papers, image library, fact sheets

WebSite topics to cover include basics of why/how it is used, templates and tools, reimbursement information, and guidelines and CER info when available

Patient/Consumer Outreach

Develop patient website with dedicated page on heart

Drive traffic to web site through Google ad words

Site will contain a basic set of informational materials, including:
- Fact sheets, PowerPoints, on-demand lectures, “canned” articles
- FAQs and “ask your doctor” Q&A’s
- Reimbursement information

Work with patient organizations (AHA) to provide informational webinars, web site content and linking; materials and speakers for meetings; free webinars

Market Speakers Bureau to other patient organizations

Healthcare Economics

Develop a survey for the membership about common denials, most frequent errors that prohibit reimbursement

Conduct a webinar on coding and reimbursement, targeting specific areas of focus e.g. cardiology

Create and maintain the SNM e-community for reimbursement and coverage issues

Develop appropriate use criteria

Collaborate on evidence-gathering/CER projects

Education

Provide educational Cases/testing and re-testing

Develop self-assessment activities

Hold dedicated workshops, such as NIH Cardiovascular Molecular Imaging Symposium

Hold CE courses at RSNA, ASNC, AM and MWW

Develop MOC Part IV projects to assess and re-assess practice performance

Press Releases and information sent to Referring physician media outlets and standard media lists

Advocacy

Advocate value with relevant stakeholders

Lobby against Medicare cuts to imaging

Maintain and enhance contacts with FDA, CMS and on Capitol Hill

Work with SNM communications, ASNC and others on safety issues (Bracco)

OUTCOMES

- Outcomes will consist of score reports from the assessment and re-assessment data collected from submitted projects. In addition, the outcome can be evaluated by the number of participants. These data can be compared to determine the impact of the program on improving competence and performance in myocardial perfusion imaging. The data can also provide evidence for PET PROS and journal articles.

- Outcomes will be measured using the following data:
  - Creation of a new SNM patient web site containing a full complement of patient-oriented materials cardiac imaging procedures, research, and reimbursement information
  - Creation of an online portal that will house educational material, evidence, reference materials and tools that will be of value to physicians.
  - Number of hits on the patient web site.
  - Increase in awareness by target group members as measured by an electronic survey. This outcome depends on the willingness of the AHA and ACC we have established relationships with groups and obtain permission to poll groups’ memberships
  - Number of downloads of free CE content.
  - Quality and participation in sessions at key target organization meetings.

- Better reimbursement and value information in advocacy materials for relevant stakeholders
- Better educated stakeholders (SNM Members, CMS, other specialty societies, Capitol Hill)
- Improved communications with ASNC, ACR, ACC, ASRT, MITA, CORAR and others as needed
- Development of appropriate use criteria and procedure guidelines where appropriate.
- Collaborate on evidence-gathering/CER projects where appropriate.
CARDIAC IMAGING

Outreach
To fully achieve the potential of cardiac functional and molecular imaging to improve patient care, it is crucial it is understood and valued by external groups including the medical, patient advocacy, scientific, regulatory, legislative and funding communities. The support of these communities will assist in improving utilization and reimbursement for existing technologies and allowing new molecular imaging technologies to be understood, accepted, and reimbursed. A critical component of outreach in this area is providing information about the evidence-based benefits of cardiac functional and molecular imaging and the risks of radiation exposure. Radiation dose, and putting radiation risk in context, is key to conducting successful outreach in this area since this is one of the biggest areas of concern among patients and referring physicians and the driving reason behind increased utilization currently of competing modalities. SNM’s multi-faceted outreach program utilizes a variety of tools and methods to reach the imaging community, referring physicians, patient and consumer groups, and regulators and legislators. Our outreach plan is designed to:

- Increase knowledge among referring physicians about functional and molecular cardiac imaging, and the benefits of these techniques relative to competing modalities
- Educate and prepare patient advocacy groups to be powerful allies in advancing the value of functional and molecular cardiac imaging
- Raise awareness and deepen understanding among administrative decision as to the evidence on the benefits functional and molecular cardiac imaging and putting radiation risk issue into perspective

To meet these goals, we will be enhancing our existing relationships and developing new partnerships with relevant societies and patient organizations. We will engage/designate member ambassadors for these groups to pursue opportunities including joint educational symposia, webinars on key topics of interest, podcasts on key issues, educational materials, and joint sessions. We will augment our speaker’s bureau with cardiac imaging experts. Existing print and web content will be inventoried and enhanced for each audience. Medical and scientific evidence will be identified, compiled, and augmented when possible. Educational material, reference material, evidence and other tools will be packaged via an online portal for maximum utility by physicians. Patient and consumer information will be updated on the new lay-oriented website, www.discoverMI.org. SNM has already engaged our Patient Advocacy Advisory Board as a partner on this issue.

We will identify where there are inconsistent application regarding reimbursement of specific practices by radiology benefit managers. Meetings will be established with these RBMs to open dialogue and help educate them concerning molecular imaging. Specific practices will also be identified that might need assistance or education concerning reimbursement. A team of experts from SNM would go in to assist the practice by providing educational materials and other tools.

ACTIVITIES TIMELINE
Lay oriented fact sheets that address the overall issue of radiation safety as well as those related specifically to MPI (myocardial perfusion imaging) will be added to the new patient microsite, www.discoverMI.org over the next three months.

SNM has established a good relationship with the American Heart Association (AHA) over the past six months. AHA is both a patient and physician organization. We have different representatives and staff involved with the 2012 CMII Cardiovascular Molecular Imaging Symposium at NIH and the SNM’s new Patient Advocacy Advisory Board (PAAB). We have other AHA staff engaged on the topic of joint sessions and collaborative webinars for both patients and physicians. Over the next six months, SNM will work to expand on this relationship to develop a true collaborative partnership. Also during the next six months, SNM is developing a lay-oriented webinar on cardiac and MPI that address a key issue for the field—radiation risk and reduction. SNM will work with the AHA to market the free webinar.

SNM is developing a patient website that will contain dedicated web pages on brain, heart, and cancer imaging. The site, www.discoverMI.org is scheduled to go live within the next three months and to contain comprehensive content within the next six months. SNM will actively promote the microsite through the web—Facebook, Twitter, and other social media and continue to drive consumer and patient traffic to the site. SNM will also develop partnerships with independent, relevant patient web-sites [e.g., mayoclinic.com].

SNM submitted a proposal for three sessions at the AHA meeting in November 2011. Over the next six months, SNM will work to publicize any accepted sessions. SNM will pursue other avenues to present pertinent information at the ACC in 2012, including a satellite session. Over the next 6-12 months, SNM will prepare and network for sessions in 2013 that address key issues at both ACC and AHA. Over the next 12 months, SNM will work to establish relationships with the American Academy of Family Physicians and the American Academy of Physicians, in addition to a sessions being held at EANM and other scientific conferences.

Finally, the 2012 CMII Cardiovascular Molecular Imaging Symposium will be held at NIH on April 19-21. We will invite a large number of patient advocacy and physician organizations from our database that we think might have an interest in cardiac imaging.

OUTCOMES
Outcomes will be measured using the following data:

- Creation of a new SNM patient web site containing a full complement of patient-oriented materials cardiac imaging procedures, research, and reimbursement information
- Creation of an online portal that will house educational material, evidence, reference materials and tools that will be of value to physicians.
- Number of hits on the patient web site.
- Increase in awareness by target group members as measured by an electronic survey. This outcome depends on the willingness of the AHA and ACC we have established relationships with groups and obtain permission to poll groups’ memberships
- Number of downloads of free CE content.
- Quality and participation in sessions at key target organization meetings.

Advocacy
The following activities on cardiac imaging fall within the SNM HPRA 2011 goals of Appropriate and Adequate Reimbursement for Drugs and Procedures and Appropriate Pathways for New Product Approvals.

The advocacy/healthcare economics activities focus on generating clinical evidence and data which will serve as the basis of advocacy and educational materials highlighting the value of cardiac imaging. While the primary target of the advocacy is government stakeholders, the evidence/data generated will also be used in the
education of physicians, patients and other stakeholders.

**TIMELINE**

2011

Next year will bring a multitude of challenges relating to reimbursement both on Capitol Hill and at CMS. The congressional budget agreement reached August 1, only delays the debate on Medicare cuts. Between the MedPAC recommendations and the U.S. House of Representatives having a list of imaging cuts on the table, SNM will need to advocate value with relevant stakeholders and lobby against Medicare cuts to imaging.

Enhance the SNM Coding Corner so as to include coding/reimbursement information to relevant external audiences such as government and non-government payers.

Develop a survey for the membership about common denials, most frequent errors that prohibit reimbursement.

Reach out to industry and other professional societies to gain support for SNM nominations to the reconstituted Medical Imaging Drug Advisory Committee.

2012

Conduct a webinar on coding and reimbursement, targeting specific areas of focus e.g. cardiology – also addressing concerns and questions discovered from the survey.

**OUTCOMES**

- Better reimbursement and value information in advocacy materials for relevant stakeholders
- Better educated stakeholders (SNM Members, CMS, other specialty societies, Capitol Hill)
- Improved communications with ASNC, ACR, ACC, ASRT, MITA, CORAR and others as needed
- Development of appropriate use criteria and procedure guidelines where appropriate.
- Collaborate on evidence-gathering/CER projects where appropriate.

**Education**

SNM has conducted many continuing education courses on cardiac imaging at major meetings and chapter meetings. However, there is a need for activities that target competence and performance, in addition to medical knowledge. This need has been identified in recent needs assessment surveys and activity evaluations. The education program will focus on self-assessment activities and case-based activities. The objective of the education program is to improve competence and performance in myocardial perfusion imaging. The education model includes assessment + case-based + re-assessment. The specific activities consist of a self-assessment module, a case-based assessment activity, and a practice performance improvement project.

A self-assessment module will be developed though SNM’s Life-long Learning and Self-Assessment Program (LLSAP). The module will include a syllabus, multiple-choice questions, and a findings tree. Participants will be evaluated on their responses to three different scoring portions to the module. They will then be able to identify areas needing improvement. The case-based activity will assess competence and performance through patient case scenarios, with a comparison of the participants’ reports to those of experts. A Maintenance of Certification Part IV project will be developed through SNM’s Practice Performance and Assessment Program (PPAP). The project includes an assessment tool, guidelines for developing and completing a performance improvement plan, and a re-assessment tool.

**TIMELINE**

A Within the first 6 months, the LLSAP module and case-based activities will be developed. During the remainder of the first year, these two activities will launch and the PPAP project will be developed.

Data will begin to be collected from the LLSAP module and case-based activity during the second 6 months. Data will continue to be collected during the lifespan of the activities.

**OUTCOMES**

Outcomes will consist of score reports from the assessment and re-assessment data collected from submitted projects. In addition, the outcome can be evaluated by the number of participants. These data can be compared to determine the impact of the program on improving competence and performance in myocardial perfusion imaging. The data can also provide evidence for PET PROS and journal articles.
QUANTIFICATION OF PET STANDARDS OF PET/CT METHODS
OVERALL GOAL: INCREASE STANDARDIZATION AND QUALITY OF PET/CT REPORTING.

Referring Physician

Ensure communities know the rigor with which PET/CT procedures are standardized – in both the protocols, the acquisition parameters, and in the reporting.

Education & Inreach to Imagers

Provide educational Cases/testing and re-testing on standards, reporting

Develop LLSAP modules on standards, reporting

Hold CE courses at RSNA, ASNC, AM, and MWM on standards, reporting

MOC part IV projects on reporting quality and turnaround time

Online tool for PET study reporting

Outcomes will consist of score reports from the assessment and re-assessment portions of the projects (Stages A and C). These data can be compared to determine the level of improvement in quality of PET reporting as well as improvement in turnaround time for reports. In addition, evaluations can capture the number of referred PET/CT procedures, allowing a comparison that will evaluate the impact of the improvements in quality and efficiency on number of referrals.
Quantification of PET Standards

Outreach

**Timeline**
The Clinical Trials Network is developing a collaborative standardized imaging protocol for FDG along with several other international groups. This is expected to be completed by December 2011.

Education

The education program focuses on two issues impacting the use of PET/CT procedures: quality of reporting and turnaround time for reports. The objectives are to improve quality of reports on PET/CT procedures written by physicians and to provide quality reports to referring physicians in a timelier manner. Reporting tools are currently available in PET PROS, but no activities have been provided to enable physicians to assess the quality of their reports or the efficiency of their reporting processes. The education model includes assessment + performance improvement + re-assessment. The specific activities include Maintenance of Certification Part IV projects through SNM's Practice Performance Assessment Program (PPAP).

Each project will consist of three parts: 1) assessment (Stage A), 2) development and completion of a performance improvement plan (Stage B), and 3) re-assessment (Stage C). Existing continuing education activities and new activities will be available to physicians for completion of their performance improvement plans.

The data generated from the two projects will provide evidence demonstrating original level of quality and efficiency compared with post-activity level of quality and efficiency.

**Timeline**
The PPAP Task Force has already begun planning a project to improve report turnaround time. The project will be available within 6 months. The Task Force has also discussed a project to improve the quality of PET/CT reporting. This project will be developed during the first 6 months and will launch soon thereafter.

During the remainder of the first year, data will begin to be collected from Stages A and C.

**Outcomes**
Outcomes will consist of score reports from the assessment and re-assessment portions of the projects (Stages A and C). These data can be compared to determine the level of improvement in quality of PET reporting as well as improvement in turnaround time for reports. In addition, evaluations can capture the number of referred PET/CT procedures, allowing a comparison that will evaluate the impact of the improvements in quality and efficiency on number of referrals.
OUTREACH

OVERALL GOAL: SNM will be the leader in educating and promoting collaboration with referring physician and patient groups.

Referring Physician
Increase awareness among referring physicians.

Provide Educational resources, tools, and templates, including:
- References/bibliography
- Image library
- Education on appropriate use

Outreach to referring physician media outlets
Place Links and information on target organizations’ sites/in their publications

Hold joint sessions with target organizations – AAN, AA, AAFP, ACC, AHA, AAFP

Provide free CE courses for neurologists, cardiologists, oncologists, family physicians.

Imagers (SNM and RSNA/ACR)
Educate imagers on appropriate use, proper reporting

Develop Practice/procedure guidelines/appropriate use criteria, references, bibliographies

Provide training on these topics and resources via:
- LLSAPS and other CE Courses
- Educational Cases/testing
- Image library
- Templates and other tools
- on-demand lectures
- Reimbursement information

Radiology Benefit Managers
Prepare package for American Healthcare Radiology Administrators (AHRA) and the Radiology Business Management Association (RBMA) and other key groups and/or meetings of interest.

Provide e-community for reimbursement/coverage issues

Patients/Consumers
Develop dedicated website with resources and information such as:
- Fact sheets, PowerPoints,
- on-demand informational lectures,
- “canned” articles
- FAQs and “ask your doctor” Q&As
- Reimbursement information

Provide Expert Speakers in a Speakers Bureau

Update appropriate entries in Wikipedia

Work with SNM Patient Advocacy Advisory Board and its members

Work with Coalitions, such as the National Health Council

OUTCOMES
- Patient advocacy groups understand current value/future promise of molecular imaging and are powerful allies in maintaining access to molecular imaging and therapy.
- Health care providers use/refer for molecular imaging and therapy procedures.
- Payors and administrative decision-makers recognize the value and benefits of molecular imaging AND...