NEws And views

The Imaging Council of the American College of Cardiology

In 2007, the American College of Cardiology (ACC) dramatically changed its membership structure by launching 4 new membership groups: Women in Cardiology Section and Council, Adult Congenital and Pediatric Cardiology Section and Council, Interventional Scientific Section and Council, and the Surgeon’s Council. On the basis of enthusiastic reception of these innovations, an Imaging Council was formed this year.

The imaging council is charged to “create a forum for cardiology imaging specialist society leadership to collaborate on issues facing cardiovascular specialists using imaging technologies to provide optimal patient care” (ACC Imaging Council Charge, personal communication, June 5, 2008). The Council was further charged to “facilitate the integration of the various cardiology imaging modalities” and “represent the interests of the imaging community to ACC leadership.” In addition to participating in the educational, quality, and advocacy activities within the ACC, it is hoped that the Council will “promote communication and co-operation among organizations and cardiovascular societies in the field.”

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To date, ACC Sections and their Councils have been a valuable resource for the decision-making bodies of the College and have provided a welcome opportunity for the ACC to cultivate leadership and engage members. In particular, the Councils are emerging as an effective means to provide expert member input on issues and policies in their respective areas of interest—an advisory role that is critically important in the rapidly changing world of cardiovascular imaging. It is hoped that the Imaging Council will have the capacity to quickly come to consensus on key issues and present the perspectives of stakeholders in relevant ACC discussions. For example, if the Imaging Council functions as other ACC Councils, it will serve to increase members’ involvement in committees and writing groups for clinical policy documents, performance measures, practice guidelines, clinical competency statements, appropriate use criteria, and data standards. Other Council activities include a new congenital heart disease registry (IMPACT; Adult Congenital and Pediatric Cardiology), a Career and Leadership Development Conference (Women in Cardiology), strengthened Society relationships (Interventional Scientific Council), and enhanced networking and focused educational opportunities (all Councils and Sections held meetings and receptions at ACC 2008).

We have invited Kim Allan Williams, MD, who is the founding chair of the ACC Imaging Council, to present his vision and plans going forward. Dr. Williams is a noninvasive cardiol-
A Vision for the Future
Kim Allan Williams, MD, FACC
University of Chicago

O N E O F T H E M O S T V A L U A B L E A D V A N C E S I N M E D I C A L S C I E N C E I N T H E L A S T C E N T U R Y has been the development of medical imaging. From our admittedly “cardiocentric” perspective, this is particularly true with regard to noninvasive cardiovascular imaging. Thus, we find it quite ironic that noninvasive cardiovascular imaging has become the flashpoint for so many political and economic concerns in recent years. The enthusiasm with which physicians and patients have embraced these developments has not been uniformly shared by third-party payors as the result of escalating costs. In addition, there have been accusations from within the house of medicine that some of the growth in imaging is inappropriate and driven by financial motivation or the practice of defensive medicine.

Particularly acute since 2004, these concerns have led to, among many others, Medicare Policy Advisory Committee reports, Congressional inquiries, reimbursement, new AUC, and other quality initiatives. The purpose of the Imaging Council is to create a forum for cardiology imaging specialist society leadership to collaborate on the rapidly evolving issues and challenges that face cardiovascular specialists who use imaging to provide optimal patient care. The Council will represent the interests of the imaging community to the ACC leadership, while promoting collaboration between these cardiovascular imaging societies. The Council will lend subspecialty society expertise to the ACC’s efforts in the areas of research, education, quality, clinical guidelines, appropriate use criteria, training, utilization, informatics, and advocacy with payors and government agencies.

This new Council has been very busy already and has great potential for impact on many College activities. In its brief period of existence, the Council has dealt with numerous guidelines, and position statements and advocacy issues have arisen, particularly in areas of coding, reimbursement, and other quality initiatives.

Recent and upcoming advocacy issues being addressed by the Imaging Council at the time of writing in-

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clude: 1) United Health Care proposed delay of lab accreditation requirements; 2) imaging-related codes that will likely be reviewed at the next Relative Value Uptake Committee meeting; 3) Centers for Medicare and Medicaid Service’s new rules on independent diagnostic testing facilities and their proposed application to private practice cardiology offices; and 4) potential testimony at the Ambulatory Payment Classification Panel meeting for the 2009 proposed Hospital Outpatient Prospective Payment System Fee Schedule. The Council’s quality agenda includes: 1) advising the ACC on cardiovascular specialist representation to the American College of Radiology Cardiovascular Appropriate use technical panel; 2) advising the ACC on participation and representation to the Center for Medical Technology Policy fall workshop on the evidence needed for cardiovascular CT reimbursement; 3) lobbying to promote funding for imaging research, one outcome of the recent NHLBI Workshop on Outcomes in Imaging; 4) participating in the upcoming revised Radiouclide Imaging (SPECT) AUC and the newly formed multimodality imaging AUC; 5) discussing the next topics for the AUC taskforce; 6) reviewing the National Quality Foundation Outpatient Imaging Efficiency Measures Draft Report; and 7) discussing participation in the Value of Imaging Research Coalition proposal for an imaging registry. We will also review the ACC’s upcoming plans for imaging educational activities at the 2009 Annual Scientific Sessions, and serve as an active resource to the Planning Committee, Topic Coordinators, and Co-Chairs.

The new Imaging Council exemplifies the new mantra of the American Medical Association, “Together We Are Stronger.” As individual cardiovascular imaging specialty societies, we have an opportunity to band together as imagers and focus on our common needs, which are far greater than our differences. This initiative is being undertaken for the benefit of our patients and member physicians. With this in mind, I am honored to be the Imaging Council’s first chairperson. If you have cardiovascular imaging concerns or thoughts on how the Imaging Council can help the ACC serve your needs better, please let us know. We welcome the opportunity and can be reached through our lead staff liaison from the ACC, Stephanie Mitchell, at smitchel@acc.org.

REFERENCE


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