Operational Commissions

1. Commission on Economics (p. 1)
2. Commission on Government Relations (p. 5)
3. Commission on Human Resources (p. 7)
4. Commission on Informatics (p. 8)
5. Commission on International Relations (p. 9)
6. Commission on Leadership & Practice Development (p. 10)
7. Commission on Membership and Communications (p. 13)
8. Commission on Patient and Family Centered Care (p. 14)
9. Commission on Publications and Lifelong Learning (p. 16)
10. Commission on Quality & Safety (p. 18)
11. Commission on Research (p. 19)
12. Commission for Women and Diversity (p. 21)

Specialty Commissions

13. Commission on Body Imaging (p. 23)
14. Commission on Breast Imaging (p. 25)
15. Commission on General, Small, Emergency and Rural Practices (p. 28)
16. Commission on Interventional & Cardiovascular Imaging (p. 29)
17. Commission on Medical Physics (p. 30)
18. Commission on Neuroradiology (p. 31)
19. Commission on Nuclear Medicine & Molecular Imaging (p. 32)
20. Commission on Pediatric Radiology (p. 35)
21. Commission on Radiation Oncology (pending)
22. Commission on Ultrasound (p. 37)

Freestanding Committees

23. Audit Committee (p. 39)
24. Awards and Honors Committee (p. 40)
25. Bylaws Committee (p. 41)
26. College Nominating Committee (p. 42)
27. Ethics Committee (p. 44)
28. Governance Committee (p. 45)
29. Intersociety Committee (p. 46)
30. Journal American College of Radiology (p. 47)
31. Board Self-Assessment Committee (p. 48)
32. American Radium Society (p. 50)
33. Task Force on Brand Promise (p. 51)
The following items were accomplishments of the Commission on Economics in 2018:

**Medicare Physician Fee Schedule (MPFS)**
- The Centers for Medicare and Medicaid Services (CMS) released the 2019 MPFS proposed rule on July 12. Economics staff prepared a detailed summary of the payment provisions of the rule. A comprehensive comment letter was submitted in September, the outcomes of which became apparent in the final rule.
- CMS released the MPFS final rule on November 1. Economics staff prepared a detailed summary of the payment provisions of the final rule. The ACR submitted a comment letter to CMS addressing aspects of the Appropriate Use Criteria (AUC) provisions as well as updates to prices for existing direct practice expense inputs.
- The ACR has joined a coalition of medical specialties and imaging equipment manufacturers specifically to address proposed cuts to direct practice expense inputs for ultrasound equipment. The Coalition was successful in obtaining a freeze on the current input values while working to collect invoices to refute the proposed values, which would result in significant reimbursement reductions to ultrasound services.
- The ACR continues to work with CMS on the topic of AUC mandate implementation, advocating for comprehensive implementation in 2020. In the 2019 rulemaking process, CMS committed to a January 1, 2020 implementation date beginning with a one year “operations and testing period” where there will be no penalties for incorrect reporting of AUC information. The College supported the use of a series of G-codes and modifiers as a temporary claims processing solution while continuing to explore the future use of unique consultation identifiers to track AUC consultation information. Specific claims processing instructions for 2020 are expected to be released by CMS in the form of transmittals and educational materials this summer.

**Hospital Outpatient Prospective Payment System (HOPPS)**
- In 2018, the ACR continued its work during both the proposed and final rulemaking cycles to ensure the accurate and clinically coherent APC placement of radiology codes under the OPPS. In March of 2018, ACR met with CMS staff presenting recommendations for new bundled radiology CPT codes APC placement for 2019.
- The Economics staff prepared a detailed summary of the proposed rule as well as for the final rule.
- The ACR’s HOPPS Committee and staff analyzed both the proposed and final rules under the HOPPS and developed and submitted comments on the proposed rule. A detailed comment letter for the proposed rule was submitted to CMS.

**Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)**
- In 2018, the ACR worked to ensure that our members were well represented during each of the 10 Wave 2 of the MACRA Episode-Based Cost Measure Clinical Subcommittee meetings coordinated by the Acumen group on behalf of CMS. The ACR looks to continue that involvement by nominating radiology representatives to participate in Wave 3 of the clinical subcommittees. These subcommittees work to develop care episode and
patient condition groups for use in cost measures to meet the requirements for MACRA. The first wave of Episode-Based Cost Measures were finalized in the CY 2019 MPFS final rule.

- The ACR’s MACRA Committee and staff analyzed both the proposed and final rules under the Quality Payment Program (QPP) and commented on the proposed rule.
- The ACR’s MACRA Committee subsequently offered webinars to members on year 3 of the QPP and how to become involved in Alternative Payment Models (APM).
- Staff and volunteer members from the ACR’s MACRA Committee continued to attend meetings of the Physician Focused Payment Model Technical Advisory Committee (PTAC) in order to monitor the development, evaluation and deployment of APM’s.

**Private Payer Imaging Policies**

The Payer Relations Committee and Network continues to monitor the impacts of Anthem’s Imaging Clinical Site of Care program, which has been implemented in 13 of the 14 states where Anthem operates and requires a new level of preauthorization for advanced diagnostic imaging services, based on their site of service. UnitedHealthcare announced implementation of a similar policy in October 2018, but delayed implementation until February 2019. Site-of-service decisions based solely on imaging costs may negatively impact patients by eliminating patient choice and ignoring pre-existing relationships between referring physicians and radiologists. The ACR does not oppose transparent steerage by payers, which has been occurring for many years; however, the College opposes any payer policies that eliminate an entire site of service (with some exceptions).

**Date of Service (DOS):**

On February 1, 2018, CMS issued new guidance on radiology date of service billing. This new guidance describes options for reporting the DOS in a global billing of a radiology service as either the date when the technical component (TC) is performed or the date when the professional service (PC) is performed. CMS further instructs providers that the date of service reported when the TC and PC are billed separately should be the dates each was performed, respectively. The new guidance does offer a flexibility unseen in previous guidance at the cost of an increased regulatory burden. ACR and RBMA met with CMS on March 15, 2018 and continue to work with CMS on this issue.

**Relative Value Scale Update Committee (RUC)**

In 2018, the ACR presented time and value recommendations for over 70 CPT codes to the American Medical Association (AMA) RUC Panel. Codes valued by the RUC are then submitted to CMS for consideration and implementation in the MPFS.

**Coding**

Among the three CPT Editorial Panel meetings in 2018, the ACR Economics Committee on Coding & Nomenclature either individually or in conjunction with other specialty societies worked on a number of coding proposals that will be implemented for the 2020 CPT Code cycle, including those proposals brought forth as a result of the Relativity Assessment Workgroup recommendations to revalue services perceived as being potentially “misvalued.” The ACR sponsored or co-sponsored seven CPT code proposals (Fluoroscopic gastrointestinal tract imaging codes, Myocardial positron emission tomography, Imaging guided lumbar puncture, 3D
Anatomic modeling- Cat III codes, Pericardiocentesis and pericardial drainage procedures, SPECT/CT, and Hemodialysis vessel mapping).

**Lung Cancer Screening**
- The Lung Cancer Screening 2.0 committee led by Debra S. Dyer, MD, FACR convenes monthly via conference calls to discuss implementation strategies. The LCS committee is exploring the barriers to adoption and trying to figure out the necessary resources and support to help radiologists become more engaged. A number of workgroups have been formed to address implementation challenges and increase screening uptake. Dr. Kurt Schoppe is leading the Lung Cancer Screening Economics and Population Health Workgroup and its primary task is to develop a one-page document on coding and billing requirements for lung cancer screening. The deadline for this educational resource is May in preparation for ACR 2019.
- The National Lung Cancer Roundtable held its second annual meeting in December 2018. Dr. Ella Kazerooni is the Chair of the American Cancer Society’s National Lung Cancer Roundtable (NLCRT) Steering Committee. The group is a coalition of organizations committed to addressing the challenges of moving lung cancer screening into the mainstream.
- Lung cancer screening reimbursement rates remain very low in the HOPPS for the calendar year 2019. The ACR is continuing to work on strategies to reduce barriers to lung cancer screening uptake including reimbursement issues. This also includes addressing the lack of payment for screening when performed in an Independent Diagnostic Testing Facility (IDTF). The ACR has held calls and written to CMS outlining our concerns with the denials in IDTF settings, however, CMS staff indicated that the National Coverage Determination (NCD) language requiring that approved facilities “make available smoking cessation interventions” must be changed through the NCD process in order to fix the issue. More than 35 bipartisan members of the House of Representatives cosigned an October 1, 2018, letter to the Secretary of the Department of Health and Human Services and the Administrator of CMS to express opposition to Medicare Administrative Contractors (MAC) that deny reimbursement for LDCT lung cancer screenings performed at IDTFs.
- ACR staff continue to answer questions on lung cancer screening. The frequently asked questions document on the ACR website is updated as needed.

**National Coverage Determination (NCD)**
- On April 10, 2018, CMS released an updated NCD for Magnetic Resonance Imaging (MRI). The update allows coverage for MRI for certain patients with Cardiac Implanted Electronic Devices (CIEDs). The proposed decision memo was released by CMS on January 11, 2018. A MLN Matters article MM10877 was released on October 19, 2018. The Heart Rhythm Society reached out to ACR to see if staff can assist with developing an FAQ document on this coverage decision. There are plans to engage members of the Medical Physics and Body Imaging committees in this collaborative effort. The goal is to draft and finalize the FAQ document Q2 of 2019.
- ACR joined the World Molecular Imaging Society (WMIS), the Society of Nuclear Medicine and Molecular Imaging (SNMMI), and members of the National Oncologic PET Registry (NOPR) Working Group in a public expression of disappointment with a
recent decision by CMS to deny their request to open a reconsideration of the NCD for 18F-sodium fluoride positron emission tomography (NaF PET), a potentially lifesaving cancer imaging procedure. The coverage document has not been reviewed since 2010. This information has been updated in the 2019 Nuclear Medicine Coding Guidebook.

**Local Coverage Determination (LCD)**
- October 3, 2018 CMS issued changes to Chapter 13 of the Medicare Integrity Program Manual, where the LCD process is described. The revisions were made in response to a provision of the 21st Century Cures Act to improve transparency in the LCD process. The manual was reformatted for stakeholders to use a roadmap with a step-by-step description of the LCD process that is accessible to all stakeholders. In addition, it sets forth consistent requirements for provider/stakeholder communications, which now must occur at predictable milestones so anyone with an interest in a LCD’s development can stay informed as it moves through the process. The update is the first for the manual since August 2015. A breakdown of the major changes are reported in the LCDs MLN Matters article MM10901 and summarized in a Local Coverage Determination Process document prepared by ACR staff.
- In October 2018, NGS finalized the Prostate Rectal Spacer LCD policy L37485. ASTRO and ACR were able to convince the MAC to extend limited coverage for use of the rectal spacer. Prior to our discussions, the material/device was deemed not medically necessary.
- In August/September 2018, ACR disseminated outreach material to CAC representatives to update LCD policies across multiple jurisdictions on Magnetic-Resonance-Guided Focused Ultrasound Surgery (MRgFUS) for Essential Tremor. Significant comments were collated and shared with Noridian Healthcare Solutions, LLC during the public comment period 6/7/18- 8/14/18. Recently, Noridian finalized their policies LCD L37728 and L37729 and many of our comments were accepted, but not all. The goal is to update policies across MACs; the next target would be to encourage CAC representatives to work with their contractor to adopt and/or update their LCD based on the Noridian finalized policy. The next realistic MAC to target would be NGS who finalized their MRgFUS policy in April 2018. To date, four MACs have finalized explicit policies and two MACs have non-coverage indications for 0398T. One MAC does not have an explicit policy or non-coverage indication.
- Draft LCD policies open for public comment will be posted to the CAC Network on Engage. ACR will work with Dr. Robert Zeman and Dr. Richard Hudes to coordinate and prioritize comment letter requests.

Respectfully submitted,

Ezequiel Silva III, MD, FACR
Chair, Commission on Economics
The following items were accomplishments of the Commission in 2018:

**Congressional Relations**

- **Mammography Protections Included in Omnibus Spending Bill** - An extension of current protections included in the Consolidated Appropriations Act (HR 1625) - signed into law by President Trump March 23, 2018 - ensures that women who want to get regular screening mammograms retain insurance coverage with no copay until January 1, 2021. The protections established in the 2002 USPSTF guidelines, call for screening every one to two years starting at age 40 — rather than biennial screening for those ages 50-74 recommended by 2009/2016 USPSTF recommendations.

- **ACR Joins Coalition Opposing “Medicare for All” Legislative Efforts** - The ACR joined the Partnership for America’s Health Care Future to prevent the federal government from assuming full control over the American health care system. As an Executive Board Member, the ACR has committed extensive resources to the Partnership’s goal of making Americans aware that a shift to one-size fits all government-controlled health care could stifle innovation and hamper our nation’s ability to continue providing its patients access to the world’s best and most innovative tools, treatment and technology. The Partnership’s efforts exerted early results regarding the Medicare for All (MFA) debate during the 2018 mid-term congressional elections. Candidates who outwardly espoused the MFA initiative did not fare well. The election results were rather clear: Moderate Democrats who support pragmatic solutions to build on what is working in American health care, not progressive Democrats who supported a MFA solution, were highly successful in their congressional office bids.

- **Multi-Specialty Letter to Delay/Repeal PAMA AUC Mandate** - On September 5, 2018, a collection of more than 20 national medical specialty societies sent a letter to jurisdictional congressional committees in opposition to the implementation of the PAMA imaging AUC policy. In response, the ACR Government Relations staff immediately drafted a comprehensive rebuttal letter and met with jurisdictional committee staff who, once again, reaffirmed congressional support for the implementation of AUC in 2020. As a result of ACR’s quick response, congressional staff confirmed there would be no legislative action to effect the implementation of AUC.

- **ACR Provides Comments to Sen. Cassidy “Surprise Billing” RFI** - The American College of Radiology (ACR) submitted comments to the bipartisan Senate Health Care Price Transparency Working Group, led by Sen. Bill Cassidy (R-LA), regarding draft legislation to address “surprise medical bills.” The College’s official comment letter expressed concern with several concepts within the draft legislation including use of the phrase “surprise medical bills” instead of more accurate references to “surprise gaps in insurance coverage,” the lack of robust provider network adequacy standards, the federal ban on balance billing and aspects of the federal caps on reimbursement for physicians who provide patient care the insurer deems to be out-of-network. Although Sen. Cassidy and other members of the working group had hoped to introduce and consider legislation prior to the end of the 115th Congress, the bill will be introduced early in the 116th Congress.

- **Radiologist Assistant** - ACR worked with radiological technologist organizations to include H.R. 1904 and S 769, the Medicare Access to Radiology Care Act of 2017, in a legislative package by the end of the 115th Congress. Unfortunately, these bills were not enacted. Despite the inability to pass legislation, there was a significant positive development as the 2019 CMS Physician Fee Schedule final rule reduced the Medicare supervision requirements from personal to direct for RAs assisting radiologists in the performance of diagnostic tests.

- **CT Colonography** - H.R. 1298 and S 3465, the CT Colonography Screening for Colorectal Cancer Act of 2017, accumulated 89 bipartisan House cosponsors and one Senate cosponsor, respectively. The bill was not addressed in the 115th Congress, but the bills’ cosponsors plan to introduce the legislation again in the 116th.

**Regulatory Agencies**

- **Artificial Intelligence/Software as a Medical Device** – Continued engagement with the Food and Drug Administration (FDA) regarding digital health initiatives, including the Software Pre-Certification Pilot Program and possible opportunities for the ACR Data Science Institute (DSI) related to AI. Worked with DSI to comment on national AI R&D/strategic plan.

- **21st Century Cures implementation** – Working with multiple ACR commissions, committees, and individuals to respond to proposed rules and policies from the U.S. Department of Health and Human Services (primarily from CMS and the Office of the National Coordinator for Health IT) on implementation of interoperability/exchange-related sections of the Cures Act.

- **Nuclear Regulatory Commission** – Developed analyses, comments/letters, and testimony on various NRC activities, including prerequisites for authorized users (AUs) of Yttrium-90 microsphere brachytherapy, training and experience for AUs of radiopharmaceutical therapy under 10 CFR Part 35 Subpart E, use of advanced technology dosimeters for occupational dose monitoring, and more. ACR’s nominee to the NRC Advisory Committee on the Medical Uses of Isotopes, Dr. Harvey Wolkov, was selected to serve in one of two radiation oncologist seats.

- **Low Dose Radiation Research** – H.R.589 - Department of Energy Research and Innovation Act, signed into law on September 28, 2018, included a provision requiring the Director to carry out a research program on low dose radiation. The
specified purpose of the program is to enhance the scientific understanding of, and reduce uncertainties associated with, the
effects of exposure to low-dose radiation to inform improved risk-management methods.

- **Medical Isotope Availability** – Continued ACR’s participation in the Interagency Mo-99 Stakeholders Group as well as support for the Department of Energy’s implementation of the ACR-endorsed American Medical Isotopes Production Act (AMIPA).
- **Medicare Quality Incentive Programs** - Collaborated with Economics and Quality & Safety Departments on analyses and formal responses to Quality Payment Program-related regulations and policies pertaining to Advancing Care Information (ACI) category of the Merit-based Incentive Payment System (MIPS).
- **Other/Agency Monitoring** - Monitored, connected, and/or communicated with all radiology-relevant federal agencies’ initiatives, policies, rulemakings, and more, including, but not limited to:
  - Regulatory agencies: FDA, ONC, CMS, NRC, and more.
  - Research agencies/orgs: NIH, AHRQ, CDC, PCORI, and more.
  - Miscellaneous: White House OSTP, DOE, GAO, DOD, VA, OMB, and NAS/IOM.
  - Identified/analyzed over 400 relevant federal issues, rulemakings, meetings, public notices.
  - Attended/monitored over 150 federal agency and federal advisory committee meetings/events
  - Nominated ACR members to serve on various federal advisory committees.

**State Legislatures and Agencies**

Much like the previous legislative session, scope of practice, physician payment, prior authorization, and insurance network-related issues were cited as top priorities by many of the ACR chapters. Out of network legislation was signed into law in New Jersey. Complex balance billing reforms did pass in four states (ME, MO, NH and NJ). Maine’s new law uses average in-network rates as a payment standard in exchange for a ban for unanticipated out-of-network care (excluding emergency care). New Hampshire prohibits balance billing for pathology, anesthesia, radiology and emergency services, setting the minimum payment at “a commercially reasonable value.” Missouri now bans balance billing for emergency care and requires a “reasonable reimbursement” while allowing for an arbitration process when the physician declines the payer’s offer. New Jersey prevents balance billing by out-of-network providers and establishes “baseball” arbitration to resolve payment disputes. The new law also allows self-funded ERISA plans to “opt-in,” meaning employers can essentially choose to protect their employees from balance bills by opening themselves up to arbitration when a payment is disputed by a physician. If an employer, does not opt-in, then the patient is offered an arbitration process.

Louisiana, Missouri, New Hampshire, Oklahoma, and Washington were successful in securing breast tomosynthesis coverage mandates during 2018 session. At the end of 2018, there was a total of 36 states with mandatory disclosure or breast density notification: AL, AZ, CA, CO, CT, DE, FL, HI, IA, IL, IN, KY, LA, MA, MD, MI, MN, MO, NC, NE, NJ, NY, NV, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, VT, WA, WI. There is also 1 state with voluntary statewide density notification (Maine). California extended the sunset of its current breast density reporting statute to January 1, 2025 in September of 2018. For a full list of state bills ACR is tracking, please click on the following link: [http://services.statescape.com/search/printquicklink.aspx?id=35296](http://services.statescape.com/search/printquicklink.aspx?id=35296)

**RADPAC**

- RADPAC raised $1,204,480 in hard money contributions in 2018.
- RADPAC had 3,008 hard money contributors in 2018.
- RADPAC’s hard money raised in 2018 ranked fourth among the 30 physician PACs.
- RADPAC had 74 group practices with outstanding group participation in 2018.
- RADPAC had 14 states that reached 20% contribution participation in 2018.
- RADPAC’s contribution percentage among the membership finished at 14%.
- RADPAC’s statistics rank it 4th out of more than 25 specialty physician political action committees (PACs).
- RADPAC attended over 500 fundraising events on Capitol Hill in 2018 and hosted another 25 events in DC and throughout the country.
- RADPAC contributed more than $1,583,657.66 in 2018 in direct contributions and Independent expenditures for radiology-friendly congressional candidates and Members of Congress.
- Overall in the 2018 election-cycle, RADPAC supported 241 races between the House and Senate and 218 were victorious – a success rate of 90%.

Geraldine McGinty, M.D., FACR
Chair, Commission on Government Relations
The following items were accomplishments of the Commission on Human Resources:

• **Updates/Revisions to Annual Workforce Survey**

The Commission met in November 2018 to update/revise the format, style, content, and appropriateness of the 2019 survey tool. The Commission discussed the persistent low response rates of the survey by practice leaders as well as the challenges with PREDs data base. The Commission members unanimously agreed that radiology practices, training programs and trainees continue to find high value in this survey and its data.

• **Establishment of HR Commission Work Groups**

Four work groups were formed to improve and meet the needs of our members, and improve the efficiency and outcomes of the Commission. All Commission members participate in one or more groups. They are as follows:

1. Radiologist Well-Being-joined Commission on Practice Learning to build well-being program for ACR members
2. Radiology Allied Health Personnel Relations-elevate relationships
3. Work Environment-ergonomics, safety
4. Leadership Soft Skills Resource-how to handle difficult radiologist

Respectfully submitted,

Claire E. Bender, MD, MPH, FACR

Chair, ACR HR Commission
The following items were accomplishments of the **Commission on Informatics** in 2018:

- The DSI published an international book chapter about our AI Ecosystem concepts published by Springer in February 2019 and continued writing articles for the New JACR Pillar, Data Science and Radiological Practice.
- The DSI hosted the second Data Science Summit on the Economics of AI in Health Care jointly with the Society for Imaging Informatics in Medicine (SIIM) in May to explore the opportunities and challenges associated with integrating AI into the economics of health care.
- The DSI co-sponsored the National Institute of Health / National Institute of Biomedical Imaging and Bioengineering (NIBIB)’s Workshop on Artificial Intelligence (AI) in Medical Imaging in August. The two-day workshop clarified the needs in foundational and translational research for machine learning in medical imaging. A white paper of the translational research proceedings will be published in the JACR.
- The DSI launched the 50 TOUCH-AI Use Cases to the DSI website and has started receiving public feedback. The Use Cases were developed by 9 different panels and provide a standardized pathway for implementing safe and effective AI algorithms into practice.
- The Informatics Commission hosted a Data Anonymization Workshop to identify and prioritize the roadblocks organizations are facing in anonymizing and accessing data. Based on the discussion at the workshop, the ACR will coordinate a working group to develop a draft of classifications for levels of anonymization and facilitate bringing key stakeholders to the table.
- The DSI collaborated with Quality and Safety to co-host the 2018 Quality and Safety meeting, “Empowering the Quality Journey Through AI” in Boston.
- The Informatics Commission added the new role of Member Liaison which has been filled by Amy Kotsenas, MD. One of Amy’s first activities will be to organize an Annual ACR Informatics Meeting.
- Members of the DSI team attended numerous meetings at the local, state, national, and international level to promote the DSI and AI in imaging. Meetings include MICCAI, SIIM C-MIMI, Virginia, California, Minnesota and Washington State Chapter Meetings, and Radiology Partners Leadership Summit on Artificial Intelligence, among others.
- The ACR-RSNA Common Data Elements (CDEs) joint committee has met regularly including an in-person meeting at RSNA 2018. The ACR contributed 150 CDEs based on the TOUCH-AI Use Cases and is providing the review and authoring tool (MARVAL).
- The Informatics Commission had the first meeting of the leaders of the Data Sharing Working Group at RSNA 2018. The working group is being chaired by Juan Batlle, MD, under the purview of Christoph Wald’s informatics portfolio and will look at issues such as Intellectual Property, Data Use Agreements, IRB approval, the value of data, etc.
- The DSI sponsored a booth at RSNA 2018 which was well-attended and met with many industry partners including AI developers, reporting vendors, and scanner manufacturers. The DSI team also held meetings with the DSI Senior Scientists, AI Advisory Group, and Panel Chairs.
- The Informatics Commission is launched a ‘Ditch the Disk’ initiative to eliminate the use of CDs to transport images. Several calls have taken place with Ashwhini Zenooz, MD who is leading this cross-departmental effort between Informatics, Quality & Safety, the PFCC, and Marketing.
- DSI added two new staff member to bring the total to 7 FTEs and 3 contractors

Respectfully submitted,
Keith Dreyer, DO, PhD
Chair, Commission on Informatics
2018 Annual Report  
Commission on International Relations

The following items were accomplishments of the Commission on International Relations in 2018:

- The commission has added Wojciech Kapalczynski, MD to its roster. Dr. Kapalczynski is the first YPS representative to the commission.
- The 2018 Global Humanitarian Award was presented to William T. Nelson, M.D., FACR for his extensive work in Tanzania.
- Approved by the ACRF Board in the winter of 2018, ACRF signed on to a Memorandum of Understanding with Rotary Club International and Imaging the World to expand a pilot study in Uganda to help reduce both infant and maternal mortality through the use of obstetrical ultrasound.
- The International Day of Radiology was celebrated on November 8 which is the anniversary of the discovery of the x-ray.
- Michael Bettman, M.D., FACR attended a meeting of the IAEA, PAHO and WHO primarily focused on risk management and radiation dose risk.
- There continues to be significant international interest in ACR products and services from international organizations as well as individual radiologists including the ACR Education Center, American Institute for Radiologic Pathology, Clinical Decision Support, Artificial Intelligence and the ACR Data Science Center, ACR Appropriateness Criteria, ACR Registries, BI-RADS and other “RADS” and ACR Practice Parameters and Technical Standards.
- DSI and ACR leadership met with a coalition of international radiology societies to discuss AI topics. The group agreed to regular meetings between the EDs/CEOs of the international radiology societies (e.g., RSNA, ECR, CAR, AOSR).
- The AI Advisory Group has added an International Affiliate Group and is inviting a liaison from each of the regional societies to join the quarterly Advisory Group meetings.
- The ACR signed a MOU with MICCAI, an international multi-disciplinary society focused on medical imaging computing. The society sponsors annual machine learning medical image challenges. The ACR and MICCAI ran a joint Health AI track at a recent AI developer meeting hosted by NVIDIA, and Dr. McGinty will be the keynote at the upcoming MICCAI annual meeting.

Respectfully submitted,

Geraldine B. McGinty, MD, MBA, FACR  
Chair, ACR Commission on International Relations
The following items were accomplishments of the Commission in 2018:

- **RLI Impact Analysis Completed in Preparation for the January 2019 BOC Meeting.** The analysis found that RLI participation increased member continuity by 18.7% and helped support a better trained volunteer pipeline as 27% of RLI Participants have engaged as part of an ACR Commission, committee, task force, etc.

- **RLI Website Moved to ACR.org.** To support the transition to RLI 2.0, the RLI website was completely redesigned and now lives within the acr.org property. This move allowed us to reinforce RLI’s relationship to ACR, move to a more content rich, user-friendly design, and leverage existing acr.org website features and functionality.

- **RLI Board Update.** After serving on the RLI Board and providing invaluable guidance since the RLI was launched in August 2011, A. Van Moore, MD, FACR stepped down as of June 2018. Jennifer Nathan, MD has since joined the RLI board and is already involved in a number of RLI programs.

- **2018 Program Highlights include:**
  - **4th Annual 2018 ACR-RBMA Practice Leaders Forum.** 207 practice leaders and business managers attended the January 12-14, 2018 Forum in Phoenix AZ.
  
  - **Kickstart Your Career Workshop.** Two Kickstart Your Career workshops were held in Silver Springs, MD in conjunction with a 4-week AIRP course. Chaired by Frank Lexa, MD, FACR, MBA, the goal of this program is to provide participants with the information they need to find their first job and be successful in their first year.

  - **2018-2019 RLI Power Hour Webinar Series.** This new series features four webinars held between June 2018 and April 2019 covering topics including personal leadership, achieving alignment in healthcare systems, creating value, and creating a culture of innovation. Chairs, Drs. Geoff Rubin and Jennifer Nathan, plan to offer six webinars in the coming year and will be collaborating with AMA and the ACR Corporatization Task Force on two topics.
  
  - **Leadership Challenges for Radiologists: Practical Solutions for Difficult Problems.** More than 40 attendees participated in this executive-level pilot program designed and chaired by Lawrence R. Muroff, MD, FACR. In addition to the focused sessions addressing common management and health care concerns faced by radiology executives, attendees participated in two real-world case study workshops.
  
  - **2018-2019 RLI Health Care Economics Program.** Over the course of seven months, more than 160 residents from 21 residency programs have completed various online and in-person activities designed to help them gain knowledge on health care economics while also satisfying the ACGME systems-based practice competency requirement. This was the third year of the program, and it continues to be a success. Planning is underway for the 2019-2020 program.

  - **2018-2019 Leadership Essentials Program.** Over the course of ten months, more than 230 residents have participated in a series of recorded lectures and live Q&A sessions that provide them with a foundation of key non-interpretive and leadership skills, such as negotiations, personal branding, and rookie leadership. Planning is underway for the 2019-2020 program.
• **7th Annual RLI Summit.** There were more than 110 attendees at the 2018 RLI Summit, which was held September 7-9, 2018, at Babson College. Thanks to continued ACR Chapter support, 16 individuals were selected by their respective chapters to receive scholarships to attend this year’s meeting. In addition, the RLI awarded 10 scholarships for residents to attend the program.

• **RLI and ACR State Chapters.** RLI continues to partner with ACR state chapters to provide RLI speakers for chapter meetings. During 2018, RLI speakers presented at 12 state chapter meetings and have visited 29 state chapters in total since the program began.

• **RLI @ AIRP in 2018.** Drs. Frank Lexa and Lawrence Muroff led 3 RLI sessions at the American Institute for Radiologic Pathology (AIRP). During the one-hour sessions, they provided a brief overview of the RLI followed by a lecture on job searching, interviewing, and how to evaluate a job offer. More than 750 residents have attended, and feedback has been positive.

• **RLI Launches the Taking the Lead Podcast.** The RLI launched a new podcast series in August 2018. Hosted by Geoff Rubin, MD, MBA, FACR, the RLI Taking the Lead 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. To date, the RLI podcasts have more than 20,000 downloads.

Respectfully submitted,

**Frank J. Lexa, MD, FACP, MBA**  
Chair, Commission on Leadership & Practice Development
The following items were accomplishments of the commission in 2018:

- Task Force on Brand Promise met throughout the year and submitted recommendations to the Board of Chancellors (BOC) at its winter 2019 meeting.
- The ACR collected $16,255,753 during the 2018 member dues year. The 95% renewal rate was one of the highest in ACR history.
- Over 1,800 new members joined the College in 2018.
- 53 out of 54 ACR Chapters have signed the Chapter Affiliation Agreements as of December 31, 2018.
- A record 41 chapters participated in the 2018 Chapter Recognition Awards.
- A record of over 100 hundred attendees participated in the 2018 ACR Chapter Workshop held at the ACR Annual Meeting.
- The ACR Committee on Awards Criteria recommended, and the Commission and BOC approved, establishing the Richard L. Morin, Ph.D. ACR Fellowship in Medical Physics.
- The Senior and/or Retired Section (SRS) welcomed members of the RFS to their reception.
- In 2018, the ACR Career Center collected a record $1.6 million. The ACR Career Center is the least expensive and most popular radiologist dedicated jobs board.
- Over 2,000 volunteers serve on over 200 ACR commissions, committees and task forces.
- Over 29,223 daily digests of Engage were sent in 2018 to ACR members with 6,590 opened. The 23% open rate is over the industry standard. Additionally, over 1,900 new threads and 6,700 replies have occurred since its inception in August 23, 2016.
- The ACR surveyed its members and non-members as part of the annual ACR tracker survey this past fall. The survey seeks to evaluate the priorities and relative value of ACR membership and its current membership offerings.
- The Committee on Fellowship Credentials (CFC) established some fellowship criteria to assist those serving in the military or reserves with recognition gained during that service.
- 100 members were conferred the title of ACR Fellow at the 2018 Annual Meeting. The BOC, upon the recommendation of the CFC, approved 98 applicants to be conferred as ACR Fellows at the 2019 convocation.
- The Young and Early Career Professional Section developed and facilitated the inaugural ACR YPS Book Club featuring, “How Women Rise” on August 27. Since its first session, the YPS has planned book clubs with the ACR SRS, the RLI, and @RadChicks providing free CME opportunities (1.25 CME per session) for ACR members.
- The Resident and Fellow Section (RFS) formed the Education Subcommittee with goals to promote imaging informatics education for residents, scholarship opportunities, and increase resident participation in case submissions for ACR Case in Point.
- Redesigned websites for ACRDSI.org and imagewisely.org were launched. Mammographysavelives.org content was moved to acraccreditation.org for better
integration with a new For Patients section that also includes content from radiologyinfo.org and patient stories from the accreditation marketing campaign.

- Radiologyinfo.org launched RadInfo 4 Kids sharing stories and videos created by children about their medical imaging experiences. Patient-written Appropriateness Criteria summaries (21 so far) are now on the site. Six patient advocates participated in discussions on best-user experience and patient-friendly content. 20,694,587 visitors were made to RadiologyInfo.org in 2018.

- Public Affairs led the outreach for PAMA/Clinical Decision Support including blogs, e-news articles, social media and webinars (Sept. 26, Dec. 11 – total of 800 registrants).

- ACR physician spokespersons or messaging appeared in 1,344 print and online articles.

- An ACR first-of-its-kind paid social media campaign helped double the number of visits to the mammography saves lives site and resulted in more than 800 new followers/shares.

- The breakthrough ACR Education Center Live Instagram Story Takeover (Nov. 15) was viewed by over 1,640 people, producing 112 visits to acr.org/edcenter and 32 leads.

- Engagement on all 15 ACR-managed social media accounts increased nearly 10 percent.

Respectfully submitted,

William Herrington, MD, FACR
Chair, ACR Commission on Membership and Communications
The following items were accomplishments of the Commission in 2018:

**Commission-level organization: Dr. Jim Rawson, Dr. Giles Boland**
- The current roster includes 125 radiologists, 12 non-radiologist clinicians and healthcare professionals, 9 radiology technologists, 4 researchers, 20 patients and patient advocates, and 14 staff members for a total of 184 members.
- Held regular quarterly calls for all committees and the commission
- Held weekly status updates with PFCC staff from across ACR

**Economics Committee: Dr. Melissa Chen, Dr. Amy Patel**
- Published 9 patient-centered Imaging 3.0 Case Studies
- Developed a “Current State” survey to gauge patient perception regarding direct interaction with Radiologists.
- Started discussion and analysis on the topic of Price Transparency related to radiology as well as research into development of a MIPS improvement activity for radiology.

**Education Committee: Dr. Cheri Canon, Dr. Matt Cham**
- **PFCC Toolkit** launched and continues to add new tools. 606 unique users as of Dec 2018.
- Supported medical student outreach and CDS education activities through Radiology-TEACHES program.
- Exploration and art display sessions (AUR 2018) on the use of Art and Radiology for improved patient care.
- Created PFCC Communications Curriculum for Residents and posted on acr.org. See Blog for more information and website address. [https://voiceofradiologyblog.org/2018/07/20/patient-centered-radiology-requires-facing-patients/](https://voiceofradiologyblog.org/2018/07/20/patient-centered-radiology-requires-facing-patients/)
- Sub-committee co-chaired by two patient advocates, is collecting patient and caregiver stories to share on ACR’s Engage platform
- Collaborating with the Commission on Publications and Lifelong Learning to build a Well-being Curriculum for Radiologists. This is part of the new ACR Radiologist Well-being Program which includes access to the Mayo Well-being Index self-assessment survey, and a custom built Toolkit of Resources for Radiologists, Residents and medical students affiliated with the ACR.

**Quality Experience Committee: Dr. Ashima Lall, Dr. Sabiha Raoof**
- Continued support for *JACR* Associate Editor, Andrea Borondy Kitts and the ACR Appropriateness Criteria (AC) Subcommittee with the [AC Patient-Friendly Summaries](https://acr.org/acrresources/2018/ac-patient-friendly-summaries).
- Chair Ashima Lall, completed R-SCAN project with patient engagement survey.

**Informatics Committee: Dr. Tessa Cook, Dr. Arun Krishnaraj**
- Rebranding to a consulting committee for all college-wide projects that need informatics insight.

**Outreach Committee: Dr. Jim Rawson, Dr. Lynn Fordham**
- Engaged with external stakeholders AHA, AAP, NAM, AHRQ, SPM, SBI, Beryl Institute, IPFCC, PCORI, APDR.
- Engaged with international stakeholders NHS, Royal College of Radiologists.
- Sponsored poster sessions at IPFCC meeting, table at SPM meeting.
- PFCC Staff presented at the Q&S Monthly Continuing Education Series.
• 2 PFCC Staff completed national for Certified Patient Experience Professional.

RSNA-ACR Joint Public Information Website (Radiologyinfo.org): Dr. Arun Krishnaraj
• Another strong year for the Radiologyinfo.org with 20,694,587 visits in 2018. Eight new disease/condition and procedure descriptions were added.
• Rad Info 4 Kids launched with stories and videos created by children about their medical imaging experiences and for children to help them better understand medical imaging.
• The Patient Advocate Advisory Network’s six patient advocates participated in teleconference discussions on best-user experience and patient-friendly content.
• 21 Patient-written Appropriateness Criteria summaries have been added to the site.

Population Health Management (PHM) Committee: Dr. Syed Zaidi, Dr. McKinley Glover
• Formed with Dr. Syed Zaidi as chair and Dr. McKinley Glover as vice-chair.
• Partnering with the ACR Commission on Economics to develop an awareness campaign about Imaging 3.0 and radiology’s potential role within the Medicare Shared Savings Program.
• Lung Cancer 2.0 Steering (LCS) Committee formed as a subcommittee of PHM with 36 members
• Collaborating with the HPI and the LCS to develop a tool that can help members understand where gaps in lung cancer screening exist nationwide.
• Creating several webinars to educate radiologists on how they can play a role in population health management.
• LCS Subcommittee: Dr. Debra Dyer
  o 4 workgroups around specific action items including Economics and Population Health, Community-based LCS programs, Outreach, and Clinical Resources and Incidental Findings.
  o Lung Cancer Screening Boot Camp scheduled 5/18 before ACR Annual Meeting.
  o “Ask the Experts” launched on the LCS resource page for patients and medical professionals to ask any question they have about lung cancer screening.
  o Lung Cancer Screening e-Learning Program now free to everyone.

PUBLIC RELATIONS HIGHLIGHTS

In 2018, we shared 277 posts regarding PFCC on social media, resulting in 2,397 total engagements (likes, retweets, comments and shares) and nearly 500,000 total impressions. PFCC spokespersons or messaging appeared in 164 print and online articles. The average monthly visitors plus total circulation for these news outlets totated 44.8 million. 99% of this coverage has a positive or neutral tone.

Respectfully submitted,

James V. Rawson, MD, FACR
Chair, Commission on Patient- and Family-Centered Care
The following items were accomplishments of the new Commission on Publications and Lifelong Learning (CoPLL) in 2018:

Communication, Collaboration and Clarity are the goals of the new Commission leadership.

- In June, an assessment survey and all-member conference call were conducted to assess member interest and preferences on CoPLL Member/Volunteer work. ACR staff were surveyed and CoPLL Chair met with them to establish a clear understanding of the new BOC charge: The reorganization of the Commission is to ensure alignment of ACR Education with the Strategic Plan to best meet member needs.

- To derive a baseline on status of Education in the College, CoPLL initiated a Global Assessment of all ACR education-related projects. All Commission leaders and their staff were interviewed to determine what the College is producing. It was a very successful collaboration. The results will be used to inform decision-making on programming to avoid duplication, improve collaboration, and ensure targeted strategic plan Objectives have educational support.

- CoPLL Connections, a quarterly e-publication to share the news and work of the Commission, was launched this summer. The e-news engages member input, shares educational articles, and fosters collaboration within the commission.

- In November, CoPLL held a strategic planning meeting to solidify vision and mission statements. A longer strategic planning meeting is planned for this summer in Nashville.
  - Vision statement: CoPLL is the premier source to meet the lifelong professional development needs of radiologists and other radiology professionals.
  - Mission statement: CoPLL is committed to designing meaningful professional development resources and experiences inclusive of all career stages and types of practice. Patient input and improved outcomes are integral to program development.

- CoPLL has scheduled a CME-bearing Future Practice Management Session for ACR 2019. It is a collaborative session with Chapter Leaders, RFS, YPS and the CoPLL planning group. There will be Ted-talk style presentations on AI/DSI, Physician Wellness, and Practice Corporatization with panel discussions. Sessions on PHM and LCS are also scheduled for ACR 2019 and CoPLL is providing coordination and CME for attendees.

- At the request of JACR EIC, CoPLL formed the Subcommittee on Publishing Ethics with James Thrall, MD, FACR, as Chair.

- For purposes of inclusivity and collaboration the following liaisons have agreed to support and inform CoPLL’s work:
  - Patient- and Family-Centered Care Advocate – Julie Moretz
  - Young and Early Career Professional Section Liaison – Amy Patel, MD
  - DSI/AI – Kathy Andriole, MD
  - Medical Physics Liaison – Mahadevappa Mahesh, MS, PhD, FAAPM, FACR, FACMP, FSCCT
CoPLL will co-create with the Commission on Human Resources the first Radiologist Well-being Program, consisting of a burnout survey tool (the Well-being Index), a Toolkit of radiologist-specific resources, and a custom Curriculum on Wellness for Radiologists. The launch of this program is scheduled for ACR 2019.

Respectfully submitted,

Lori Deitte, MD, FACR
Chair, Commission on Publications and Lifelong Learning
The following items were accomplishments of the Commission in 2018.

- FDA approved ACR to accredit DBT units; 3,233 DBT unit applications processed since April 9, 2018, of which 1600 were previously approved via FDA Certificate Extension Program.
- Digital Mammography QC Manual with Tomosynthesis Supplement published November 2018. Webinars for technologists and medical physicists have been conducted.
- ACR accreditation transitioned to digital upload default option for image submission for all but 2 modalities in October 2018. Stereotactic breast biopsy and breast US to follow in Q1/Q2 2019.
- RO accreditation streamlining underway to facilitate and standardize process, as other programs. RO physics committee met at AAPM in July. RO Committee conference call held October 2018.
- Prostate MI Designation Program being developed; Program Requirements available by Q2 2019.
- 2018 RADPEER survey sent to users in September. Results being reviewed by RADPEER Committee. RAD-Improve peer-learning, funded by IF Grant ongoing by Dr. Kruskal and team.
- Fall 2018: E. Stephen Amis fellows, Drs. Omid Khalilzadeh & Jasmine Locklin visited ACR.
- DICOE has new online application. Currently, 99 DICOE entities include 342 facilities.
- By December 31, 2018, 161 radiology practices registered for R-SCAN projects; 75 completed. On average, 22% improvement over all topics. CDS-RSCAN registry live pilot on NRDR portal.
- National Radiology Data Registry (NRDR) implemented significant upgrade on user interface in August. CMS data submission for 2018 reporting year offers self-service submission with quick score feedback from CMS. NRDR piloting 3 new modules, fluoroscopy, DR and NM, in DIR.
- 2017 Diagnostic Imaging Measure Set currently being coded for testing in registry environment similar to GRID. Testing starts soon, then measures go to CMS for NRDR or CMS MIPS use.
- 2018 Annual Conference on Q&S was a success, with higher attendance and greater engagement by attendees than 2 previous years. In all, 246 individuals attended; 161 paid registrants included ACR members, non-member radiologists, residents, business managers, and technicians.
- A PP and TS Task Force established to address Res. 43 issues: (1) competency requirements, (2) committee composition, (3) scope of PP and TS, and (4) implementation of TF recommendations.
- All Practice Parameters and Technical Standards documents approved by Council at ACR 2018 or by the CSC and the BOC, were added to the website with the quickest turnaround time to date.
- Committee on Drugs and Contrast Media developed Contrast Reaction Pediatric Card, similar to the card for adult patients. The Committee is now working on a Contrast Reaction Mobile App.
- Development completed of external review site for Appropriateness Criteria, providing external stakeholders not involved in AC topic development with means to comment on AC content.
- 21 patient-friendly summaries of AC topics published in JACR; members from the Subcommittee on AC Patient Engagement serve as technical reviewers and co-authors. There are 186 DI/IR AC topics with 914 clinical variants and over 1600 clinical scenarios on website. A multi-department staff team worked with leadership to make CDS and PAMA more accessible to ACR members.
- O-RADS US lexicon published in JACR; risk stratification study underway. PI-RADS v2.1 manuscript accepted by the European Urology- Radiology Prostate Pathway. TI-RADS JACR papers ranked highest among top cited JACR articles contributing to 2017 - 2018 impact factor. JACR requested articles and articles downloaded - highest from January-October 2018.
- By November 15, 2018, 43,395 individuals renewed pledges to Image Wisely. A redesigned Image Wisely website launched in October with Facebook Live as new feature.
The following items were accomplishments of the Commission on Research in 2018:

- Pamela K. Woodard, MD, FACR, appointed new Chair of Commission on Research, assumed responsibility on June 1st, 2018. Under Dr. Woodard’s leadership, Commission membership was reset adding new members in new areas of expertise to advise ACR Research areas of interest as well as extending terms for some legacy members ensuring knowledge transition. New organization structure has a collaboration with ASNR for neuroradiology research committee.

<table>
<thead>
<tr>
<th>Commission Chair</th>
<th>Pam Woodard</th>
<th>WashU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neuroradiology Committee Chair</td>
<td>Max Wintermark</td>
<td>Stanford</td>
</tr>
<tr>
<td>Cardiovascular Committee Chair</td>
<td>Karen Or dov as</td>
<td>UCSF</td>
</tr>
<tr>
<td>Imaging Oncology Chair</td>
<td>Etta Pisano</td>
<td>UPENN/ Harvard</td>
</tr>
<tr>
<td>Radiation Oncology Chair</td>
<td>Mitch Machtay</td>
<td>Cleveland Clinic</td>
</tr>
<tr>
<td>Pediatric Committee Chair</td>
<td>Raj Krish namur thy</td>
<td>Nationwide Children’s Hospital</td>
</tr>
<tr>
<td>Molecular Imaging Working Grp</td>
<td>Dave Mankoff</td>
<td>UPENN</td>
</tr>
</tbody>
</table>

- Grand Rounds conducted at ACR member institutions by ACR Chief Research Officer increasing member understanding of the impact of ACR research in expanding the purview of medical imaging, interventional radiology, and radiation oncology practice for the benefit of patients – meeting Board objective. Mayo-Arizona, Wake Forest and Emory will be visited this spring.

- Authored, Submitted and received NCI Intent to Fund notifications for next six-year funding cycle on ECOG-ACRIN and NRG Operations and Statistical and Data Management research grants and IROC Central Operations, Central information Technology, Diagnostic Imaging Quality Assurance and Radiation Therapy Quality Assurance grants. These grants will fund 6 years of continuing imaging oncology research and providing standardized imaging services starting March 2019 and generate $96M in funding managed through ACR. Submitted grant renewal submission to NCI Division of Cancer Prevention, NCORP Research Base for an additional 6 years of funding starting August 2020.

- Collaboration with DSI to (1) establish AI-CERTIFY procedures in response to commercially sponsored requests for validation of algorithms created for AI-TOUCH Use Cases or independent commercial sector interest and (2) achieve FDA Medical Device Development Tools (MDDT) program approval of AI-TOUCH and AI-CERTIFY methods.

- Collaboration with Q&S to facilitate projects leveraging the LCSR – Analysis of LCSR outcomes in comparison to NLST study population outcomes; Developing structured datasets and enable analysis by American Cancer Society intended to promote increased adoption of lung cancer screening.
The Neiman Institute announced (1) a new, four-year research partnership with Northwell Health to establish the Harvey L. Neiman Health Policy Program for Clinical Effectiveness and Outcomes Research (iCEOR) at Northwell Health and (2) a new five-year, $3 million research partnership to establish the Health Economics and Analytics Lab (HEAL) within Georgia Tech’s Ivan Allen College of Liberal Arts. HEAL will focus on applying big data analytics and artificial intelligence to large-scale medical claims databases to better understand how evolving health care delivery and payment models affect patients and providers.

Respectfully submitted,

Pamela K. Woodard, MD, FACR
Chair, Commission on Research
2018 Annual Report

Commission for Women and Diversity
Katarzyna J. Macura, MD, PhD, FACR - Chair
Staff: Jan Cox, Sr. Director
Angelica Vergel de Dios

Committee for Women:
Chair: Susan J. Ackerman, MD, FACR

Committee for Diversity and Inclusion:
Chair: Johnson B. Lightfoote, MD, MBA, FACR

The following items were accomplishments of the Commission in 2018:

1. JACR Column “Diversity Matters” – Co-Editors Johnson Lightfoote and Katarzyna Macura: Eight articles in the series have been published to date, available online: http://www.jacr.org/content/diversity-matters


3. American College of Radiology PIER Program - Pipeline Initiative for the Enrichment of Radiology with Nth Dimensions: The 2nd Annual Summer Internship Program designed for first year minority students in partnership with Nth Dimensions offered a research and clinical exposure opportunity in various radiology sub-specialties to five 2018 PIER Scholars - Shefali Kanal – Preceptors Dr. Ackerman and Dr. Davis, Bing (Edna) Wang – Preceptor Dr. Birch, Artraeu Simms – Preceptor Dr. West, Kristen Williams – Preceptor Dr. Johnson, Kirsten Schofield – Preceptors Dr. Gibbs and Dr. Pollum. The ACR Nth Dimensions PIER Program was launched as ACR Innovation Fund Grant in January 2017, with the goal of improving diversity and inclusion in the radiological professions through early exposure and longitudinal mentoring for underrepresented minority and women medical students. Our inaugural class of five Radiology Summer Interns completed and presented their research projects at NMA in August 2017, and at ACR in May 2018. Our second class of five Radiology Summer Interns completed and presented their research projects at NMA in August 2018, and will present at ACR in May 2019. Ongoing longitudinal mentorship of the PIER Scholars continues, as well as quarterly workshops presented at medical schools around the country to inform and inspire medical students. Preceptors have been retained, the number of preceptors expanded, and preceptor manuals prepared for current and future ACR members to participate.

4. Workshops: As part of our PIER program, as above, we organize annual clinical skills demonstration workshops presented to medical students at their schools across the country by ACR volunteer faculty. We offer hands-on exposure to radiological procedures, i.e. ultrasound, biopsies, IVC filter retrieval, radiation oncology treatment planning. This year we conducted an independent workshop creatively facilitated by ACR Staff Jan Cox at the Morehouse School of Medicine in Atlanta with the assistance from Faculty and Trainees from the Department of Radiology at Emory.
5. **Barriers to Diversity Survey (leader Pari Pandharipande, MD)**: The “ACR Barriers to Diversity Survey” was launched in February 2018. Our goal was to expose barriers to diversity in radiology and radiation oncology through a membership survey. We prospectively planned to invite 900 members to participate, oversampling women to achieve 50% participation (n=450) per gender group. The survey was open for participation from 2/27/18-4/26/18. In total, 900 survey invitations were issued. The response rate was 51.2%, considered a favorable response rate for a physician workforce survey. The respondent group included 52.9% women (n=244) and 47.1% men (n=217). The ethnic and racial composition of the respondent group, respectively, was: 5.6% Latino or Hispanic (94.4% not Latino or Hispanic); and 61.8% Caucasian, 3.5% Black or African American, 20.4% Asian or Asian American, 0.4% American Indian or Alaska Native, 5.6% Mixed Race, 8.2% Unknown. In total, 39.3% were trainees. The mean age of the respondent group was 40.2 years (±10.4 years). The preliminary analysis suggested that several policy-relevant insights into potential barriers were observed. Survey results will be published in 2019.

6. **3rd Annual Diversity Forum during the ACR 2018 “Women in Radiology - Why Men Should Care”**: This session featured a panel of both academic and private practice male radiology leaders who provided their insight and input about how we can mentor, support, and advance women radiologists at all career levels to achieve gender parity.

7. **Grassroots Chapter Diversity Network (leader Gail Morgan, MD)**: We are expanding our Commission’s outreach to impact the diversity movement at the regional level by helping ACR chapters establish Diversity Committees, which can be ad-hoc committees not requiring bylaws changes. To date, 25 chapters have either already implemented such committees or are in the process of establishing Diversity Committees.

8. **Advocacy**: Sponsorship and joint project with AAWR to support **12-week paid parental leave for eligible radiologists (leader Elizabeth Arleo, MD)** - achieved endorsement by SCARD and the ABR Board of Governors approved a new policy for the DR and DR/IR Core exam, which will allow for extended leave.

Respectfully submitted,
Katarzyna J. Macura, MD, PhD, FACR – Chair
The following items were accomplishments of the Commission on Body Imaging in 2018:

**Lung Cancer Screening**
- The Lung Cancer Screening 2.0 committee led by Debra S. Dyer, MD, FACR convenes monthly via conference calls to discuss implementation strategies. The LCS committee is exploring the barriers to adoption and trying to determine the necessary resources and support to help radiologists become more engaged. A number of workgroups have been formed to address implementation challenges and increase screening uptake. Dr. Kurt Schoppe is leading the Lung Cancer Screening Economics and Population Health Workgroup and its primary task is to develop a one-page document on coding and billing requirements for lung cancer screening. The deadline for this educational resource is May in preparation for ACR 2019.
- The National Lung Cancer Roundtable held its second annual meeting in December 2018. Dr. Ella Kazerooni is the Chair of the American Cancer Society’s National Lung Cancer Roundtable (NLCRT) Steering Committee. The group is a coalition of organizations committed to addressing the challenges of moving lung cancer screening into the mainstream.
- Lung cancer screening reimbursement rates remain very low in the HOPPS for the calendar year 2019. The ACR is continuing to work on strategies to reduce barriers to lung cancer screening uptake including reimbursement issues. This also includes addressing the lack of payment for screening when performed in an Independent Diagnostic Testing Facility (IDTF). The ACR has held calls and written to CMS outlining our concerns with the denials in IDTF settings, however, CMS staff indicated that the National Coverage Determination (NCD) language requiring that approved facilities “make available smoking cessation interventions” must be changed through the NCD process in order to fix the issue. More than 35 bipartisan members of the House of Representatives cosigned an October 1, 2018, letter to the Secretary of the Department of Health and Human Services and the Administrator of CMS to express opposition to Medicare Administrative Contractors (MAC) that deny reimbursement for LDCT lung cancer screenings performed at IDTFs.
- ACR staff continue to answer questions on lung cancer screening. The frequently asked questions document on the ACR website is updated as needed.

**Colon Cancer Committee**
- The Colon Cancer Committee, under the direction of Dr. Judy Yee continued to work towards Medicare coverage of CT colonography (CTC) for colorectal cancer screening.
- The Colon Cancer Committee held in-person meetings at the Society of Abdominal Radiology and RSNA meetings to discuss various issues including but not limited to CTC coverage and increasing CTC visibility.
- The Committee focused efforts during Colorectal Cancer Awareness month in March on raising awareness among African-Americans and Latinos that CT colonography is a comparably effective, yet less-expensive, less invasive, more culturally acceptable screening option to standard/optical colonoscopy. Members of the ACR Colon Cancer Committee were featured in English and Spanish radio public service announcements (PSAs) distributed to urban and Spanish-language stations nationwide. The PSAs and the educational article direct the audience to RadiologyInfo.org for more information on CTC. Colon Cancer Committee doctors also took part in a joint Twitter chat with Montefiore Medical Center in late March. Social media posts (Facebook, Twitter, Instagram, etc.) for the ACR and patient groups used during March leveraged
The hashtag #virtualCT. A Voice of Radiology Blog post outlining CTC efforts and the need for wider coverage of CTC was run the last Friday in March.

- The ACR and Colon Cancer Alliance sponsored a Capitol Hill briefing on September 12th to educate staff members representing about 30 senators and congressional representatives on the merits of CT colonography (CTC) for colorectal cancer screening. The event served as platform for general education about CTC and sought to recruit more congressional co-sponsors for H.R. 1298, the CT Colonography Screening for Colorectal Cancer Act of 2017. Introduced by Reps. Brad Wenstrup (R-OH) and Danny Davis (D-IL), the bipartisan legislation would mandate Medicare coverage of CTC colon cancer screenings. The bill currently has 86 cosponsors. A Senate Bill, S. 3465, was introduced on September 18th.
- Dr. Cecelia Brewington was appointed to the National Colorectal Cancer Roundtable Steering Committee during the group’s annual meeting in November.

Incidental Findings Committee

- The Incidental Findings Committee now has a page on the ACR website, including links to the 13 published incidental findings papers. The most recent publications, currently in press in the JACR include Managing Incidental Findings on Thoracic CT: Mediastinal and Cardiovascular Findings and Management of Incidental Pituitary Findings on CT, MRI and 18F-Fluorodeoxyglucose PET. Dr. Pari Pandharipande, Chair of the Incidental Findings Committee, is currently considering a new proposed topic, pineal gland lesions.

ACR Assist

- The Body Imaging Commission is collaborating with the IT Commission on developing Computer Assisted Reporting / Data Science (CAR/DS) modules within ACR Assist under the auspices of the DSI. An authoring and review tool has been developed and was demonstrated at RSNA. ACR Assist plans to move forward aggressively with developing and disseminating modules to the vendor community, with DSI helping to validate the modules.

X-RADS

- A number of “X-RADS” projects (e.g. PI-RADS for prostate cancer, LI-RADS for liver cancer, etc.) are in various stages of development and coordination, in collaboration with the Quality & Safety Commission and other Commissions and committees.

Respectfully submitted,
Lincoln Berland, MD, FACR
Chair, Commission on Body Imaging
Commission/Task Force Update:

I. Screening and Tech Assessment

- The Screening and Emerging Technology Committee is actively discussing the present state and future of breast imaging in the United States. One of our critical tasks is to guide radiologists, technologists and other providers regarding the rapidly evolving imaging landscape so that patients receive the most appropriate and highest quality care. Our committee has identified the following list of active and/or future issues that may affect the invested parties mentioned above.
- The top three to address will be: AI, supplemental screening standards and recommendations, and aid in development of national data on outcomes tied to mode of detection, possibly through SEER.

II. Government Relations

- PALS Extension
  - A provision extending the PALS language to January 1, 2021 was included in the Minibus Appropriation bill containing the Labor-HHS appropriation and was signed into law on September 28, 2018. This extension of current protections helps ensure that women who want to get regular screening mammograms retain insurance coverage with no copay. The protections recognize, for purposes of insurance coverage requirements, 2002 USPSTF guidelines that call for screening every one-to-two years starting at age 40 – rather than biennial screening for those ages 50-74 allowed by 2009/2016 USPSTF recommendations.

- DBT coverage
  - Since 2005, a total of 36 states with mandatory disclosure or breast density notification: AL, AZ, CA, CO, CT, DE, FL, HI, IA, IL, IN, KY, LA, MA, MD, MI, MN, MO, NC, NE, NJ, NY, NV, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, VT, WA, WI. One state with voluntary statewide density notification (Maine). California extended the sunset of its current breast density reporting statute to January 1, 2025 in September of 2018. Washington, DC will hold a hearing on breast density reporting requirement in late October 2018. We expect bills in GA and IA to be reintroduced during the 2019 legislative session. It is possible we will see a re-introduction of breast density reporting bill in NM as well.
  - In July 2018, the House Appropriations Committee included a PALS Act extension amendment in the FY 2019 Labor - HHS bill prohibiting the implementation of raising the age of mammography to 50 in federal guidelines until January 1, 2021. The Senate Appropriations Committee also included an extension to January 1, 2021 in their Labor – HHS bill passed in June 2018.

- MQSA Proposed Rule at OMB
  - As of November 8, 2018, an FDA-proposed rule to update MQSA regulations and add requirements related to breast density is at OMB (a final step before publishing it in the Federal Register: [https://www.reginfo.gov/public/do/eAgendaViewRule?pubId=201810 &RIN=0910-AH04]). Based on past comments by FDA staff, proposed changes are expected to address “new” modalities other than screen-film (since the only regulation that exists at this time is 900.12(e)(6): quality control tests — other modalities); breast density reporting; the mammography medical outcomes audit program; final assessment categories; additional authorities to address facility noncompliance.

III. Breast Screening Leadership Group

- Group 3 will start their webinars in January 2019 for 10 weeks.
- The face-to-face meeting will take place at SBI 2019 for Group 3 on April 3, 2019. The meeting included faculty and members of Groups 1 and 2.
- Groups 1 and 2 have been subdivided into 3 sub-groups:
IV. Economics

- The ACR was instrumental in recommending that the Centers for Medicare and Medicaid Services (CMS) include ICD-10 diagnosis codes N63.10 *Unspecified lump in the right breast, unspecified quadrant* and N63.20 *Unspecified lump in the left breast, unspecified quadrant* to National Coverage Determinations (NCD) 220.3 Percutaneous Image-Guided Breast Biopsy. The update became effective on October 1, 2018.
- Members of the committee completed an AMA RUC survey to assure relative values in the Medicare payment schedule will be accurately and fairly presented to the CMS for a code related to x-ray of a surgical specimen.
- There are new CPT codes for breast MRI starting CY 2019. The ACR successfully advocated maintaining the RVU values originally assigned by the RUC after the preliminary MPFS had included lower RVU values across the new breast MRI code family.

V. Communications

- Media Tour
  - At the suggestion of Shawn Farley, Director of Public Affairs for the ACR, members of the Commission on Breast Imaging participated in a series of radio interviews (i.e., a media tour) to coincide with National Breast Cancer Awareness Month. These interviews occurred in the first week of October with Drs. Smetherman, Monticciolo, Baker, Kopans, Rebner, Friedewald, Eby and Evans participating. Shawn and his team handled all logistics.
- Letters to the Editor
  - Both the Washington Post and Consumer Reports published articles with inaccurate data. A call to action was initiated to send letters to the editor. Continued efforts will be made to combat misinformation in the press.

VI. Committee on Practice Parameters – Breast Imaging

- 2019 cycle
  - One ready for field review- ACR Practice Parameter for the Performance of Whole-breast Ultrasound – Principal Reviewer and Chair: Dr. Lillian Ivansco
- New topic in the works
  - ACR Practice Parameter for Preoperative Image-Guided Localization in the Breast for the 2020 cycle - Principal Reviewer: Dr. Karla Sepulveda
    1. Drafting committee formed
    2. Loose first draft in place
- ACR Practice Parameter being revised
  - ACR Practice Parameter for the Performance Stereotactic-Guided and DBT guided Breast Interventional Procedures.

VII. Panel on Appropriateness Criteria-Breast Imaging

- AC’s recently released:
  - Breast Implant Evaluation-Lourenco (new)
  - Breast Imaging of Pregnant and Lactating Women (di Florio, Slanetz)
  - Evaluation of the Symptomatic Male Breast (Niell, Lourenco)
  - Breast Pain (Holbrook, Moy)
- New AC’s in the works
  - Imaging of the Axilla - High priority designated by GAHC (LePetross, Slanetz)
  - Supplemental Screening - High priority designated by GAHC (Weinstein, Slanetz)
  - Imaging after Reconstruction – Medium priority designated by GAHC (Heller, Lourenco)
  - Imaging of Transgender Patients - Medium priority designated by GAHC (Brown, Lourenco)
VIII. **BI-RADS® 5th edition**

- Atlas sales: 3132 hardcopies; 1165 e-books; 366 bundles (hardcopy + e-book); 44 institutional licenses; 97 MCR/eBook bundles; 326 reference guides.
- Atlas translations: 6 complete (Spanish, Portuguese, German, Mandarin, Japanese, Greek): an academic translation into Lao is underway, a request to translate the atlas into Farsi has been received and is under legal review.
- 5th Edition licensing: 20
- 5th Edition limited licensing: 4
- 4 vendors (Applied Software, MRS Systems, Siemens, and Applied Software) are now approved for NMD 3.0, which means that the 5th Edition material has been completely incorporated into their software products.
- Task Force on Digital Breast Tomography – We expect the DBT supplement for the Mammography Lexicon to be complete and posted on the ACR website by the end of the year

**Areas of Concern:** We continue to be very concerned about maintaining access to annual screening mammography starting at age 40 and the potential impact of implementation of the USPSTF final screening recommendations on the women of the United States.

**Member Value:** The Commission continues to fight for annual screening for all women 40 years and older.
The following items were accomplishments of the Commission in 2018:

- The VA Subcommittee and the Emergency Radiology Committee hosted content sessions at ACR 2018 with attendance reaching room capacity for each session.
- The Military Subcommittee and Emergency Radiology Committee have planned CME sessions for ACR 2019.
- The Military Subcommittee assisted the Committee on Fellowship Credentials in identifying ways for recognizing radiologists for ACR Fellowship based on awards and honors in the military. The BOC approved two new military FACRs and these members will receive their Fellowship at the 2019 Convocation.
- The Critical Access Hospital Work Group was formalized as a subcommittee of the Network Committee and expanded its scope to include rural practices.
- The Teleradiology Work Group has a white paper in draft form and collaborated with staff to develop and administer a Tele Work Force Survey.
- The Committee on Emergency Radiology continues to work with the American College of Surgeon’s Committee on Trauma to revise the radiology section of the Orange Book.
- The Economics Committee continues to work on and discuss the issues of radiology extenders, time interval between preliminary and final reports, reimbursement, and the demand on organizations to produce quick turnarounds on final interpretations.
- Over the past year (2018), the GSER Practice Parameter Committee has processed six practice parameters through the full revision process, including one parameter referred from the 2018 annual meeting. Each of these parameters will be up for adoption at ACR 2019.
- The Quality and Safety Committee is working on an ACR position paper on the use of point-of-care ultrasound (POCUS). This white paper will focus on recommendations and comprehensive strategies to ensure the safe and appropriate use of POCUS as it relates to standards and documentation for internal policy development.
- Members of the commission reviewed the annual work force survey to identify potential changes to ensure that the survey and resulting data is more pertinent to GSER constituencies. The Commission on Human Resources reviewed and accepted all of the recommended changes and incorporated them into the 2019 work force survey.

Respectfully submitted,

Robert Pyatt, Jr., M.D., FACR
Chair, Commission on General, Small, Emergency and/or Rural Practice (GSER)
The following items were accomplishments of the Commission in 2018:

I. The Interventional Radiology (IR) Commission Credentials Oversight Committee, in conjunction with the SIR and SPR leadership, have finalized a proposed Resolution on Core Privileging for Radiologists performing imaging guided procedures. The intent of the Resolution is to support the principles of privileging based upon core competencies and a total body of experience gained during training, rather using arbitrary procedural numbers and volumes. The Committee has been able to gain commitment for co-sponsorship of this Resolution from the SIR, SPR and the Virginia, California, Florida and Wisconsin Chapters. Co-sponsorship from the CSC, with primary sponsorship of the BOC, are imminent.

II. The IR Commission reviewed a proposal for an ACR survey focused on exclusive contracts and how they may be adversely impacting the practice of independent IRs. After review of the proposed survey, the consensus of the Commission members was the proposed survey was worthwhile, but needed to be less leading/biased. The issue of exclusive contracts and their impact on independent IRs needs to be better understood because the topic is already affecting some IR practices, and will only become a bigger issue with the new integrated IR residency programs. The IR Commission believes that they are the correct group to help lead this discussion and that the ACR may be the best forum for this conversation.

A joint effort between the IR Commission, SIR and survey writers is under way to develop a more goal/solution-oriented survey and constructive survey. The hope is that the information gained from this survey may provide the IR Commission an understanding of the factors that influence the maintenance of exclusive contracts that exclude independent IRs from having privileges at their hospital, while at the same time, allowing cardiologists, vascular surgeons and interventional nephrologists to have the same privileges being requested by the independent IRs.

III. The IR Commission chair has participated in two Practice Parameters for 1) Interventional Clinical Practice and Management and 2) Selective Internal Radiation Therapy (SIRT) or Radioembolization for the Treatment of Liver Cancer field review process.

IV. The IR Commission chair reviewed a proposal submitted to the Innovation Fund LOI Application, the Letter of Interest was approved, and the full application is currently pending.

V. The IR Commission chair reviewed the CoPLL Educational Program Questionnaire survey from the Commission on Publications and Lifelong Learning.

Respectfully,

Alan H. Matsumoto, M.D., FACR
Commission on IR and CV Imaging
The following items were accomplishments of the Commission in 2018:

- The reception for medical physics residents and graduate students at the 2018 AAPM Annual Meeting in Nashville was the best attended event of its type to date. The ACR also hosted a table at the medical physics residents career fair on the following day. (Over 20 residents signed up for further contact with the College during the meeting.)
- Several medical physicist members will participate in ongoing preparation of questions for the next level of the RADAR program.
- A medical physics task force completed the update to the Guide to Professional Practice of Clinical Medical Physics and posted it on the ACR website in October.
- The commission provided comments to MITA regarding the transition from Electronic Product Radiation Control (EPRC) performance standards to International Electrotechnical Commission (IEC) standards for general fluoroscopy equipment.
- The commission has provided review and comment on:
  - ACR–AAPM Technical Standard for Medical Performance Monitoring of Image-Guided Radiation Therapy (IGRT)
  - ACR–AAPM Technical Standard for Medical Physics Performance Monitoring of SPECT-CT Equipment
  - ACR–AAPM–SIIM Practice Parameter for Electronic Medical Information Privacy and Security
  - ACR–AAPM Technical Standard for Medical Physics Performance Monitoring of SBRT
- The commission hosted a webinar for medical physicists on the ACR Data Science Institute
- The commission brokered an ongoing meeting between ACR leadership and the AAPM Executive Committee to maintain open lines of communication and a forum to discuss opportunities for further collaboration.
- The Richard L. Morin, PhD Fellowship in Medical Physics was submitted to the Board of Chancellors for consideration (approved – January 2019).
- Work on updating the ACR-AAPM Radiation Safety Officer Resources has begun. (This publication is both a national resource and an IAEA training tool.)

Respectfully submitted,

Mahadevappa Mahesh, MS, PhD, FAAPM, FACR.
Chair, Commission on Medical Physics
Goals

The Neuroradiology Commission assists the Board of Chancellors in an advisory capacity, with the charge of representing and seeking to improve the practice of Neuroradiology. Among the tasks of the Neuroradiology Commission is the application of quality metrics to Neuroradiology practice and related actions, such as clarifying support for such specific standards as stroke treatment.

The following items were subject to the attention of the Commission in 2018:

- The Head Injury Institute has changed leadership, with the installation of Christopher Whitlow, MD, PhD of Wake Forest School of Medicine as the new Institute Chair in Summer 2018.
- The Head Injury Institute is in conversations with Cohen Veteran’s Bioscience and the American Society of Emergency Radiologists to leverage research opportunities, and to build on the successful to-date collaborations that have been established between the Institute and Cohen Veteran’s Bioscience.
- TBI-RADS is under continued development, with the innovation award seed funding concluded in November, 2018, directed at retrospective data collection and analysis. The next step in the research plan is an augmented related retrospective registry review.
- Two Head Injury journal articles are currently in development; the first on mild to moderate TBI, and the second on severe TBI, with submission intended for Spring 2019.
- The Commission is being called upon as part of a broad multi-society effort to assist in advocacy and support where vertebral augmentation payment is concerned. The value of vertebral augmentation has been recently debated in the scientific literature, and movement toward an overly expedited payment determination has jeopardized thoughtful resolution of the debate. The Commission believes in its responsibility to advocate for thorough and effective determination of best practices, to appropriately understand and influence the quality of care delivered, and therefore to strongly advocate for thoughtful and deliberate debate when necessary.

Respectfully submitted,

Alexander Norbash, MD, MS
Chair, Audit Committee
Economics

- Reviewed and provided input on a code change application (CCA) that was presented at the September 2018 CPT Editorial Panel meeting to develop new CPT codes for several types of SPECT and SPECT/CT studies. The CCA requested a generic set of codes modeled after the current tumor and radiopharmaceutical distribution codes; the new family of codes will represent a wide variety of nuclear medicine SPECT and SPECT/CT services. The codes will be available January 1, 2020.
- Provided feedback whether schillings test CPT codes 78270, 78271 and 78272 should be deleted due to low volume. Members of the Committee confirmed the schillings test kit is no longer available in the U.S.; therefore, the codes were deleted from the 2019 CPT code set.
- Involved with updating the 2019 Nuclear Medicine Coding User’s Guide.
- Continued to review NCCI edits relating to nuclear medicine, ensuring that the proposed NCCI edits are appropriate.
- Responded to member inquiries related to nuclear medicine and PET/CT coding.

Education

- Organizing an educational session titled ‘Best Clinical Practice: PET/CT Head and Neck; PET/CT Chest’ to be presented at the SNMMI annual meeting.
- Participating in leadership session “Future of Nuclear Medicine / MI / Theranostics and Training Support” at the SNMMI annual meeting.

Government Relations

- Participated in a GR-Federal Regulatory Committee workgroup and commented on NRC’s request for information regarding training and experience for authorized users of unsealed materials requiring a written directive.
- Commented on NRC’s draft tenth revision of the licensing guidance for Y-90 microsphere brachytherapy.
- Continued to support increased federal funding for DOE cooperative agreement holders working to establish domestic production of Mo-99/Tc-99m (per the ACR-endorsed American Medical Isotopes Production Act).
- Monitored NRC advisory committee meetings and teleconferences and submitted nominations for open positions.
- Monitored HHS implementation of the various provisions of the 21st Century Cures Act related to device/drug oversight, health information technology, and research.

Human Resources/Workforce

- Dr. Harolds gave a presentation on certain aspects of burnout at the ACR Intersociety Summit Meeting and has also written several papers on the topic.
NM & PET Accreditation – as of February 2019

- NM: 3538 facilities active; 33 facilities in process; 3505 facilities accredited; 29 active clinical; 31 active phantom reviewers; average reviewer turnaround time = 7.6 days.
- PET: 1618 facilities active; 19 facilities in process; 1599 facilities accredited; 25 active clinical; 24 active phantom reviewers; average reviewer turnaround time = 6.9 days.
- We anticipate clinical and phantom reviewer training to be held in Reston, probably in the October time frame.
- ACR accreditation data is being used to assess diagnostic reference levels for several nuclear medicine studies. Manuscript is in submission.

Practice Parameters & Technical Standards

The following practice parameters will be presented at ACR 2019:

1. ACR–ACNM–ASTRO–SNMMI–SPR Practice Parameter for Treatment of Benign and Malignant Thyroid Disease with Iodine-131 – New
2. ACR–SPR Practice Parameter for the Performance of Parathyroid Scintigraphy – Revised
4. ACR–SNMMI–SPR Practice Parameter for the Performance of Scintigraphy and Uptake Measurements for Benign and Malignant Thyroid Disease – Revised
5. ACR–ACNM–ASTRO–SNMMI Practice Parameter for the Performance of Therapy with Unsealed Radiopharmaceutical Sources – Revised

The following practice parameters are being worked on for the 2020 cycle:

1. ACR–ACNM–ASNR–SNMMI Practice Parameter for Brain PET-CT Imaging in Dementia – Revised
2. ACR–ACNM–SNMMI–SPR Practice Parameter for the Performance of Gastrointestinal Scintigraphy and Liver Scintigraphy – Combine the GI and Liver Scintigraphy practice parameters into one document
5. ACR–ACNM–SNMMI–SPR Practice Parameter for the Performance of Tumor Scintigraphy (with Gamma Cameras) – Revised
6. ACR–ACNM–ASTRO–SNMMI Practice Parameter for Lutetium (Lu-177 DOTATATE) Therapy – New
Other Issues

ABR Changes to 16-month Pathway
- Continue to publicize significant changes that ABR has made in 16-month Pathway; currently there are 62 residents in the newly redesigned 16 month ABR dual certification in radiology and NM pathway with 37 radiology residency programs participating. This is a significant new pipeline for NM.

Appropriateness Criteria (AC) Panels
- Continued to identify NM & MI expert representation to serve on each AC Panel.
- Nuclear Medicine experts on the AC panels are reviewing and updating procedure names used in Nuclear Medicine AC topics to improve consistency in the procedure names and utility of the recommendations to users of AC content.

New ACR Nuclear Medicine Course
- Inaugural ACR Nuclear Medicine course was held at the ACR center 3/4-3/5/2019. Drs. Don Yoo and Phillip Kuo are the Co-Directors. 1st course was capped at 25 attendees.

Respectfully submitted,

Don C. Yoo, MD, FACR
Chair, Commission on Nuclear Medicine & Molecular Imaging
Pediatric Safety and Quality Committee: Chair, Jonathan Dillman, MD
Pediatric Sedation Committee: Chair, Lisa States, MD

- Sedation Survey to acquire base-line data regarding sedation practices for children undergoing imaging completed and distributed to SCORCH (Society of Chiefs of Radiology at Children’s Hospitals).

Pediatric Practice Parameters Committee: Chair, Bev Newman, MD

- Ultrasound contrast cystography added to the VCUG parameter and will be presented as a resolution for the 2019 meeting.
  PPPC assisted with 11 parameter revisions for 2019. PPPC Chaired 4 parameter reviews including VCUG, scoliosis, neurosonography, and pediatric CT

Pediatric Education Committee: Co-Chairs, Cindy Rigsby, MD and Ben Taragin, MD

- At RSNA 2018, Committee initiated collaboration discussions with Kristen DeStigter, President of Imaging the World for developing pediatric ultrasound content for improving pediatric care in Uganda. Content curriculum is under discussion.

Pediatric Economics & Government Relations/Advocacy Committee: Co-Chairs, Richard A. Barth, MD, FACR, FAAP and Stuart Royal, MS, MD, FACR

- Abusive Head Trauma Resolution developed in collaboration with the Society for Pediatric Radiology and endorsed by ACR BOC for presentation at May 2019 Council Meeting
- CPT codes for contrast-enhanced voiding urosonography and whole body MRI are being explored with ACR CPT code committee. Baseline data is being collected thru survey to SPR and SCORCH members.
Pediatric radiologists joined in support of ACR goals during Hill Day on Wednesday May 23, 2018 and also discussed with legislators and staff the importance of AUC and Decision Support in optimal pediatric care and cost-savings.

Respectfully submitted,

Richard Barth, MD
Chair, ACR Commission on Pediatric Radiology
The following items were accomplishments of the ACR Ultrasound Commission in 2018:

- **Ultrasound Contrast and Elastography Category I CPT Codes**

  The commission worked diligently with an informal working group of the Economics Committee on Coding and Nomenclature to apply for two new category I codes. This group was chaired by Mark Alson of the ACR CSC and consisted of radiologists representing the ARRS, AUR, ICUS, RSNA, SPR and the SRU. A specific contrast survey was designed for the ACR membership excluding physicists, RFS, radiation oncologists and international members. Expert users of ultrasound contrast were solicited and assistance was also sought from the ACR leadership including then chair, Jim Brink. Very impressive results were analyzed from 240 unique responses nationally. The ACR CPT team & RUC team created a framework for two category I codes, CEUS (contrast enhanced ultrasound) and USE (ultrasound elastography). There were extensive efforts designed to mitigate against any devaluation of the family of US codes.

  Five codes, 2 for CEUS and 3 for USE were then presented to the AMA Relative Value Update Committee by the ACR RUC team in January 2018. All of these RUC proposed values, with the exception of 76X0X, were subsequently accepted by CMS based upon the 2019 HOPPS proposed rule and will be available for use and reimbursement by Medicare as of January 1, 2019. An attempt to devalue the one code was thwarted with assistance from the ACR such that CMS eventually approved all 5 codes. The ACR chair of the US Economics Commission is now Wui K. Chong, after the retirement of John Benson who served diligently for many years in this capacity.

- **ACR O-RADS Committee**

  This committee is chaired by Rochelle Andreotti with Phyllis Glanc as vice chair. They have been working with dedicated members for several years and in 2018 completed the lexicon phase of O-RADS for the ultrasound subcommittee by developing and publishing a manuscript in the JACR which was accepted with no revisions. The lexicon represents a practical, uniform vocabulary for describing the imaging features of ovarian masses. This committee consisted of members of national and international societies including the American College of Radiology, American Institute of Ultrasound in Medicine, Canadian Association of Radiologists, European Society of Radiologists, International Ovarian Tumor Analysis, International Society of Ultrasound in Obstetrics and Gynecology, Society of Pediatric Radiology and the Society of Radiologists in Ultrasound. Supporting liaison members included representatives of the American College of Obstetrics & Gynecology, International Society of Gynecologic Pathologists, Society of Gynecologic Oncologists and the Society of Obstetricians and Gynecologists of Canada. A new training module is being developed by our ultrasound education sub-committee led by Lori Strachowski. Oral presentations and educational exhibits have been presented at both national and international meetings including the 2018 RSNA, SRU and AIUM and ECR in 2019. Future presentations include the IOTA Congress, ISUOG, RSNA, SRU and AIUM in 2019. The committee is now working on risk stratification which represents
the application of the lexicon to a risk stratification system classification for consistent patient follow up and management.

The MRI subcommittee, chaired by Caroline Reinhold, took a slightly different approach due to the paucity of ovarian data in the MR literature compared to US. They are working on the MR lexicon and risk stratification in tandem. The plan is that the lexicon manuscript will go to the JACR. The risk stratification manuscript has recently been sent to the NEJM. The goal is to try to publish both manuscripts at the same time.

- **ACR US Education Task Force**
  
  There are 3 committees related to medical student, resident/fellow and international or global ultrasound education. The medical student education committee chair, Donald DiSalvo retired in 2018 and the new chair is Roya Sohaey. The survey of radiology chairs was distributed in 2017 with the assistance of SCARD. The data has been analyzed and the first draft of the manuscript has been reviewed and edited. It is now being circulated among all of the committee members prior to submission to the JACR. The global education committee, chaired by Sharlene Teefey, devised a survey that was finalized in 2017. It was submitted by the ACR to members in the late fall of 2018 after being approved by the education commission and the board. The results are currently being analyzed and additional input is also being sought with the plans for a manuscript submission to JACR perhaps near the end of this year. The resident/fellow committee, chaired by Leslie Scoutt has not yet completed the survey and is nonfunctional at this point in time.

- **Collaborative Ultrasound Practice Parameters**
  
  Three practice parameters were approved at the ACR annual meeting in May 2018, all were collaborative with other societies.

  **Resolution 24:** Collaborative Practice Parameter for the Performance of the Ultrasound Examination for Detection and Assessment of Developmental Dysplasia of the Hip

  **Resolution 25:** Collaborative Practice Parameter for the Performance ad Interpretation of Ultrasound of the Extracranial Head and Neck

  **Resolution 27:** Collaborative Practice Parameter for the Performance of Standard Diagnostic Obstetrical Ultrasound

Respectfully submitted,

[Signature]

Beverly G. Coleman MD, FACR, FAUM, FSRU
ACR US Commission
Goals

The Audit Committee assists the Board of Chancellors in fulfilling its oversight responsibilities for the financial reporting process, the effectiveness of the system of internal controls and risk management, the independent audit process, and the College’s process for monitoring compliance with laws and regulations and the code of conduct governing its financial activities.

The following items were accomplishments of the Committee in 2018:

- Audit Committee Education: The Committee received a presentation from staff on the new accounting guidance on revenue recognition, and the expected impact to the ACR.
- Financial Auditor Evaluation: The Committee conducted an evaluation of the external auditing firm, RSM. The Committee expressed overall satisfaction with the services provided. RSM was appointed to conduct the FY2018 Consolidated Financial Statement, Uniform Guidance, and CURE audits.
- Financial Annual Audit: At the spring meeting, the Committee reviewed and approved the annual audit plans for the FY18 Consolidated Financial Statement, Uniform Guidance, and CURE program audits and the 2017 Pension and 403B plan audits. The Committee reviewed the audit reports with the external auditors in the September and October 2018 and approved the reports. The audits were completed on time and the ACR received clean audit opinions.
- Tax Returns: The Committee reviewed the annual tax filings for June 30, 2017 with the external tax advisors. Key areas of the return were reviewed and discussed including governance policies, executive compensation, and unrelated business income. The committee approved the returns.
- Compliance Updates: Compliance updates were provided at each meeting to report on compliance program activities and incident tracking.
- Internal Control Review: Staff provided an informational presentation on internal controls over financial reporting.
- Legal Updates: Legal provides updates at each meeting on pending/potential claims against the ACR.
- Audit Committee Charter: The Committee performed an annual review of its charter, and no updates were identified at this time.
- Audit Committee Survey: The Committee performed a self-evaluation survey. The feedback was positive, and overall the Committee member feel they are adequately fulfilling their role.

Respectfully submitted,

Alex Norbash, MD
Chair, Audit Committee
Annual Report of the
Committee on Awards and Honors
2018
James H. Thrall, MD, FACR - Chair

The following items were accomplishments of the Committee in 2018:

- Committee members received and reviewed the nominees for the awards of Gold Medal, Honorary Fellowship, and Distinguished Achievement in preparation for the committee meeting on Monday, July 30, 2018, in Chicago, Illinois.
- The committee deliberated and determined the nominees to be considered by the Board of Chancellors.
- The Board of Chancellors, by vote during the fall 2018 meeting, approved the following awardees:
  - Gold Medalists
    - Bibb Allen Jr., MD, FACR, Birmingham, AL
    - Manuel L. Brown, MD, FACR, Birmingham, MI
    - David C. Kushner, MD, FACR, Norfolk, VA
  - Honorary Fellows
    - Seung Hyup Kim, MD, PhD, Korea
    - Anne W.M. Lee, MD, Hong Kong
  - Distinguished Achievement Award
    - James L. Morrison, Leesburg, VA
- The committee’s work has been supported by Freda White and Lisa Puertas. This work is year round with collection of nomination/support letters, communications with committee members to include one face to face meeting per year, database updates with membership and awardees, logistical preparations for the annual committee meeting, document (historical, procedural, protocol, minutes) maintenance, and preparations for the annual Convocation.

Respectfully submitted,

James H. Thrall, MD, FACR
Chair, Committee on Awards and Honors
The following items were accomplishments of the Committee in 2018:

- There were no proposed Bylaws amendments considered for resolution by the 2018 Bylaws Committee or 2018 Council.

- The Committee implemented Resolution 42b, memorialized by the 2016 Council, by removing language in Article VI, Board of Chancellors, Section 2, Membership, to reflect that the College Nominating Committee shall propose the two Young and Early Career Professional Section (YPS) members candidates to the Council to run in an election for a single term of two years on the BOC.

- The Committee worked with the Board of Chancellors to review Article II, Membership, Section 1, Membership, in consideration of eligibility requirements for nomination to Fellowship. Language was drafted to propose an amendment to foster members to seek the ACR Fellow honor by deleting the “consecutive” year requirement of having at least 10 consecutive years of membership. This proposal may encourage those members who otherwise would not meet the criteria due to a gap in their membership to be nominated. The Committee will formally endorse the resolution recommending adoption to the 2019 Council.

- The Bylaws Committee considers suggestions for amendment of the ACR Bylaws. The goal of the committee is to work with other college commissions and committees to improve the Bylaws and keep them current.

Respectfully submitted,

Albert L. Blumberg, MD, FACR
Chair, Bylaws Committee
Goals
The College Nominating Committee consists of nine members who are charged with making nominations for ACR elected and/or selected positions.

Accomplishments
The CNC proposed the following slate of candidates for election in May 2019:

Officers
Debra L. Monticciolo, MD, FACR, of Temple, Texas, for president.
Katarzyna J. Macura, MD, PhD, FACR, of Baltimore, Maryland, for vice president.

Board of Chancellors
The CNC recommends the following members be considered for election to the BOC:

Robert S. Pyatt Jr., MD, FACR, of Chambersburg, Pennsylvania has been recommended to run for a second three-year term to chair the Commission on General, Small, Emergency and/or Rural Practices.

William Small Jr., MD, FACR, of Maywood, Illinois has been recommended to run for a first three-year term to chair the Commission on Radiation Oncology.

Jenny T. Bencardino, MD, of Jericho, New York, and Johnson B. Lightfoote, MD, FACR, of Pomona, California have been recommended to run for a first three-year term to chair the Commission for Women and Diversity.

Theodore Dubinsky, MD, of Seattle, Washington, Thomas Ptak, MD, MPH, PhD, of Severn, Maryland, and Timothy L. Swan, MD, FACR, of Marshfield, Wisconsin, have been recommended to run for a first three-year term for BOC Member-At-Large.

William Small Jr., MD, FACR, of Maywood, Illinois, was selected to serve concurrently as the ASTRO representative on the Board of Chancellors for a three-year term.

Council Speaker
Richard Duszak Jr., MD, FACR, of Atlanta, Georgia, for Council Speaker.

Council Vice Speaker
Joseph G. Cernigliaro, MD, FACR, of Jacksonville, Florida, and Amy L. Kotsenas, MD, FACR, of Rochester, Minnesota have been recommended to run for a two-year term for Council Vice Speaker.
Council Steering Committee

*Of the following nine candidates, four are to be elected in a contested election by the Council to serve a two-year term on the CSC:*

Timothy A. Crummy, MD, FACR, of Middleton, Wisconsin  
Eric B. Friedberg, MD, FACR, of Johns Creek, Georgia  
Lauren P. Golding, MD, of Summerfield, North Carolina  
Richard Gunderman, MD, FACR, of Zionsville, Indiana  
Seth M. Hardy, MD, MBA, FACR, of Lititz, Pennsylvania  
K. Elizabeth Hawk, MD, MS, PhD, of Studio City, California  
Andrew B. Rosenkrantz, MD, of New York, New York  
Kevin L. Smith, MD, FACR, of Sauk Rapids, Minnesota  
David C. Youmans, MD, FACR, of Princeton, New Jersey

College Nominating Committee

*Of the following five candidates, three are to be elected in a contested election by the Council to serve a two year term on the CNC:*

Scott F. Cameron, MD, of Newton, Massachusetts  
Candice A. Johnstone, MD, of Shorewood, Wisconsin  
Taj Kattapuram MD, of Arvada, Colorado  
Rajendra P. Kedar, MD, FACR, of Tampa, Florida  
Derrick Siebert, MD, of Wausau, Wisconsin

Private Practice Representative

Rand J. Stack, MD, MBA, of Franklin Lakes, New Jersey, was selected for one two-year term as a private-practice representative to the Intersociety Summer Conference, effective in July 2019.

Concerns

None.

Respectfully submitted,

Join Y. Luh, MD  
*Chair, College Nominating Committee*

Gaurang V. Shah, MD, FACR  
*Vice Chair, College Nominating Committee*
The following items were accomplishments of the Committee in 2018:

- The Committee reviewed and updated the process and procedures for complaint submissions to the Ethics Committee. ACR staff continues to work with the College’s IT staff to establish a secure TRIAD site dedicated to the submission of images solely intended for use by the Ethics Committee members and select independent reviewers. A new dedicated secure website has been configured to house case folders that contain documents related to the current cases being investigated by the Committee.

- The Committee received one request to review a complaint in 2018 for its consideration that alleged violations of ACR’s Code of Ethics. During the preliminary review process the Committee determined that allegations central to the grievance are outside of its purview. The Committee dismissed this matter.

- A matter involving expert witness testimony currently remains under investigation.

- The Committee continues to review reports of federal and state law enforcement investigations, verdicts and settlements that involve ACR members. However, the Committee does not itself investigate matters until ongoing litigation has concluded.

- The Committee continues to focus on its goals as established by the 1997 Committee on Ethics: to assist its members and the College in understanding and addressing the dynamic ethical issues that confront diagnostic radiology, radiation oncology, interventional radiology, nuclear medicine, and medical physics. Accordingly, the Committee may contribute articles to JACR and the ACR Bulletin that inform members about relevant ethical challenges in their practices.

Respectfully submitted,

Peter M. Doubilet, MD, PhD, FACR
Chair, Ethics Committee
The following items were accomplishments of the Committee in 2018:

- The Governance Committee was tasked with considering if ACR should permit use of pre-recorded candidate speeches. After much careful consideration the Committee recommends against pre-recorded speeches by candidates at the annual meeting for the following reasons:
  - The Committee recognizes that circumstances may prevent a candidate from attending at the time a speech is expected. However, the Committee fears it would be difficult to equitably judge when such a candidate should be allowed to record a speech to be presented in lieu of a live speech.
  - The Committee believes it is important that the Council have as much information as possible, to potentially include pre-recorded material that would be available to augment the election manual and the live speech. However, the Committee defers to the Speaker and Vice Speaker, with the advice of Council, to determine how and when to augment material available to Council to inform their vote.

- The committee continues to focus on its overall goals: (1) to address issues of governance and representation within the College and (2) to monitor and evaluate the College’s election process.

- There were no additional issues presented in 2018 for consideration by the committee. The election process continues to function smoothly and effectively.

Respectfully submitted,

William T. Herrington, MD, FACR
Chair, Governance Committee
A. Goals

- To promote collegiality within the field of radiology.
- To foster and encourage communication and interchange among the national radiological societies.
- To identify, evaluate, and make recommendations on problems and areas of concern in radiology identified by the member societies or at the Summer Conferences.
- To establish and promote communication among the leaders of national radiological societies and to provide them with open access to all the resources of the ACR through the Committee.
- To establish the agenda for and conduct an annual Summer Conference.

B. Accomplishments

- 2018 Summer Conference
  The Intersociety Summer Conference was held August 3-5, 2018 in Stowe, VT. The topic was “Managing Stress to Mitigate Burnout.” Tait Shanafelt, MD, (Jeanie & Stewart Ritchie Professor of Medicine, Chief Wellness Officer, Stanford Medicine; Director, WellMD Center; Associate Dean, Stanford University School of Medicine) delivered the keynote address on “The High Cost of Physician Burnout: Organizational Approaches to Physician Well-Being.”
  The final report has been published in the JACR with four areas of focus: 1) effective leadership development, 2) utilizing measurement tools to manage stress and burnout, 3) the role of the organization in mitigating stress and burnout, and 4) advocacy efforts to lessen the burden of regulations, billing, compliance, and certification.

- 2019 Summer Conference
  “Leading and Developing High Functioning Teams with a Just Culture” will be the topic of the August 9-11, 2019 Summer Conference at Skamania Lodge in Stevenson, WA, and will expand on the prior meeting and wellness. Dr. Shanafelt will present an update on physician burnout. A preliminary program will be available in April.

- ISC Executive Committee
  A special thank you to the two members who rotated off this past year, David C. Beyer, MD, and James V. Rawson, MD, for their excellent service and input to this group. The committee continues to embrace and include representative thought leaders in our field, and I am pleased to announce the current committee members (new members in italics):
  
  Cheri L. Canon, MD  Peter R. Eby, MD  Lori A. Deitte, MD
  Carolyn C. Meltzer, MD  Derek L. West, MD  Iris C. Gibbs, MD

Respectfully submitted,

Jonathan B. Kruskal, MB, ChB, PhD
Chair, Intersociety Committee
The following items were accomplishments of the JACR in 2018:

- The journal transitioned smoothly from founding editor-in-chief Bruce J. Hillman, MD, FACR, to Ruth C. Carlos, MD, MS, FACR. A three-month overlap period ensured continuity before Dr. Carlos took over Jan. 1, 2019.
- The JACR published two ACR Appropriateness Criteria supplements (with a combined total of 37 criteria) and 19 patient summaries.
- Special issues included Social Media and Medicine (January) and Data Science: Big Data Machine Learning and Artificial Intelligence (March).
- JACR associate editors gathered in Reston for the annual Editors’ Retreat. The 2018 theme was, “What would you do if you were the new JACR editor?”
- The Hillman Fellow, Hanna Zafar, MD, spent two weeks between Reston and Elsevier headquarters in NYC. Her fellowship project looks at alternative metrics for journal success.
- A reader survey was completed in advance of the transition to a new editor-in-chief.
- JACR editors participated on a 2018 Academy Health panel. Much of the content was adapted into the Health Equity special issue in 2019.
- The JACR impact factor increased for the fifth straight year and now stands at 3.383.
- Associate editor Andrea Borondy Kitts presented during the Fast 5 session at RSNA, discussing the JACR AC patient summaries.
- The JACR began including graphical abstracts with select articles.
- Reader CME activities migrated to CoreTex platform.
- 5,736 credits of reader CME were claimed.
- The journal’s social media presence continues to grow. The monthly tweet chat averaged 1.6 million impressions. The JACR also launched an Instagram account and experimented with live events on Twitter and Facebook.
- Data Science was introduced as the fifth content pillar for the journal.
- The JACR partnered with Elsevier to research gender diversity in radiology publications. The first phase research will be submitted as an RSNA abstract. The complete study will be submitted for peer-reviewed publication.

Future Considerations

- The JACR will continue to monitor the impact of appropriateness criteria supplements on the journal’s impact factor.
Respectfully submitted,

Chair Name & Credentials
Chair, Name of Commission / Committee / Task Force
2018 Annual Report

The following items were accomplishments of the Committee on Board Self-Assessment in 2018:

- The Committee reviewed and updated/revised the survey contents and instrument mid-2018. These changes will provide improved trend analysis and hopefully a greater response rate.
- Ms. Mary Jo Tarrant joined the Committee in mid-2018. We are delighted to have her expertise in survey work and believe she will help align the survey questions/results/analysis with the ACR strategic plan.

We would like to provide a full report at the Fall 2019 Board meeting with Committee recommendations.

Respectfully submitted,
Claire E. Bender, MD, MPH, FACR
Chair, Committee on ACR Board Self-Assessment
Commission/Task Force Update:

The ACR Radiation Oncology Appropriateness Criteria committees have been fully transitioned over to the American Radium Society and the committees have started to work on updating old topics and to explore new topics once the transfer had been completed. A number of committees have started to produce new product and the GI committee has started voting on a number of topics. The committees had face to face meetings at the 100th Annual ARS meeting in 2018 and had a session at the meeting updating the Society on current topics. The AU Committees will play a role in the scientific portion of the 101st Annual meeting in 2019.

The ARS awarded its inaugural seed grant to Kunal Saigal, MD of the Florida Hospital Cancer Institute to investigate 18F-FDG PET/CT and MRI radiomics to predict outcome in locally advanced cervical cancer.

The ARS is preparing for the 101th annual meeting of the ARS in Monarch Beach, California.

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):

The ARS is in the process of working to increase attendance at the Annual Meeting as well as membership in general.
ACR Task Force on Brand Promise
2018 Annual Report

In January 2018, the ACR Board of Chancellors (BOC) authorized the formation of a short-term Task Force on Brand Promise to investigate the negative perceptions of the College’s brand personality by our younger and early-career members (as determined in a 2017 survey). The goal was to recommend attainable, high-visibility solutions to achieve the desired brand promise and thereby improve the perceptions of members and other stakeholders. The following items were 2018 accomplishments of the Task Force on Brand Promise (The complete final task report was presented to the BOC in January):

- **Accomplishment #1** Include RFS and YPS as members on the Task Force
  
  The Task Force included nine members (three RFS and four YPS): Seth Hardy, MD, MBA, FACR, Chair, Lauren Golding, MD, Prasad Shankar, MD, Oluwatoyin Idowu, MD, Yayone Rivaud, MD; Dania Daye, MD, PhD, Tejas Patel, MD, MBA, Suzanne Palmer, MD, and Melissa Davis, MD, MBA.

- **Accomplishment #2**
  
  The Task Force members met during monthly teleconferences to review the research, discuss the College’s current and desired brand personality, and to formulate recommendations to achieve the ACR brand personality desired by our current and future members.

- **Accomplishment #3**
  
  The Task Force recommendations *(most of which are in development or under consideration)* included:

  **Negative Perception: ACR is homogeneous and non-representative**

  **Recommendation: ACR needs to be more inclusive**

  Offer short-term assignments so younger, early-career and diverse members can make an impact and be recognized for their achievements without committing to multi-year terms.
  
  Reinforce and visibly communicate mentorship and scholarship opportunities
  
  Consider a “40 under 40” type award program and give recipients recognition at the annual meeting and in publications and trade press
  
  Restructure the FACR requirements, giving new consideration to years of membership and nominations
  
  Hold contested elections for all elected positions and be more transparent about the College’s governance structure.
  
  Communicate commission and committee achievements regularly to all members via email and social media
  
  Encourage state chapters to prioritize engagement of diverse members and prospective members
  
  Substitute “board certification” with “initial certification” in the ACR bylaws to open the pipeline to members from optional-MOC states

  **Negative Perception: The ACR core purpose and values are viewed positively overall although the value of innovation was not viewed as positively by negative leaners.**

  **Recommendation: ACR needs to be more innovative and progressive**

  Champion the representation of underserved and diverse populations in AI datasets
Support the development of a national platform to replace CDs for transfer of patient imaging data (#ditchthedisk)

Develop more opportunities to participate in ACR International Outreach activities

Refresh the ACR brand graphics to reflect a progressive inclusive membership organization

Negative Perception: ACR is conventional and has an “Ivory Tower” leadership

Recommendation: ACR needs to open the communication pipeline for diverse idea sharing

Balance the annual meeting’s advocacy content with more leadership content (RLI, B-schools), highlighting inclusive and innovative achievements of those who have been valuable contributors.

Build greater awareness among attendees at AIRP of the career-long value of ACR membership.

Consider enhancements to the Engage community and ACR social media (micro-engagements) that encourages greater participation.