

Did you know...?

AAPM | 07/16/2019 | San Antonio TX

Dustin A. Gress, MS, DABR, DABSNM Senior Advisor for Medical Physics

Disclosures

- None
 - except

Outline

- How does ACR work?
- Where does ACR fit in the ecosystem of societies?
- ACR Strategic Plan
- Resources
- Quality Measures

How Does the ACR Work?

With so many initiatives going on at once, the College needs a well-defined, streamlined structure that is well representative of its diverse constituency. But who does what, how do the different parts of the ACR fit together, and how are you represented in this structure?



ACR Bulletin

CHAPTERS, SUBSPECIALTY SOCIETIES, RFS, AND YPS

How Does the ACR Work?

With so many initiatives going on at once, the College needs a well-defined, streamlined structure that is well representative of its diverse constituency. But who does what, how do the different parts of the ACR fit together, and how are you represented in this structure?

The CEO reports to the BOC.

CEO

ACR

ACR staff report to the CEO and execute policy and implement programs in accordance with approved budgets.

ACR STAFF

ACR Bulletin

THE BOARD OF CHANCELLORS

EXECUTIVE COMMITTEE

The Executive Committee acts for the BOC when the group is out of session.

The Board of Chancellors (BOC)

What is the Board of Chancellors? The Board of Chancellors is the executive body of the ACR. It includes a maximum of 34 chancellors and is presided over by the chair.

What does it do? The BOC meets to discuss strategic issues, guide the College's finances, oversee the activities and programs of the College, and implement policies determined by the ACR Council.

The BOC organizes commissions, committees, and task forces to implement policy and develop programs consistent with the ACR's strategic plan.

COMMISSIONS, COMMITTEES, AND TASK FORCES

Commissions, Committees, and Task Forces

Who makes up these groups? Each commission is chaired by a member of the BoC and made up of ACR members typically with specific experience in the ACA. Commissions are further divided into committees and subcommittees. Task forces are formed at the discretion of the chair of the BOC.

What do they do? Commissions, committees, and task forces are established to carry out policy initiatives and oversee activities and programs.

The BOC may submit resolutions to the council.

Policy decisions from the council are sent to the BOC.

ACR COUNCIL

COUNCIL STEERING COMMITTEE

The CSC acts for the council when the group is out of session and may submit resolutions to the council.

The ACR Council

What is the ACR Council? The council includes 343 representatives from chapters, branches of the military, government agencies, qualified subspecialty societies, the Resident and Fellow Section, and the Young and Early Career Physician Section.

What does it do? The council debates and approves ACR policy resolutions, bylaws resolutions, and practice parameters and technical standards.

Chapters and councilors may submit resoultions to the council.

Each chapter and qualified society is represented on the council.

CHAPTERS, SUBSPECIALTY SOCIETIES, RFS, AND YPS

"Word association"

If this society

Think this

ACR GR

- "If you're not at the table, you're on the menu."
- "If they don't let you at the table, bring a folding chair."

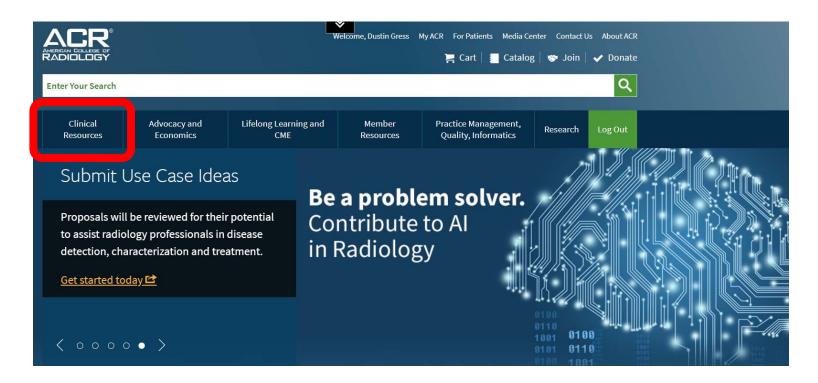
RADPAC vs. others

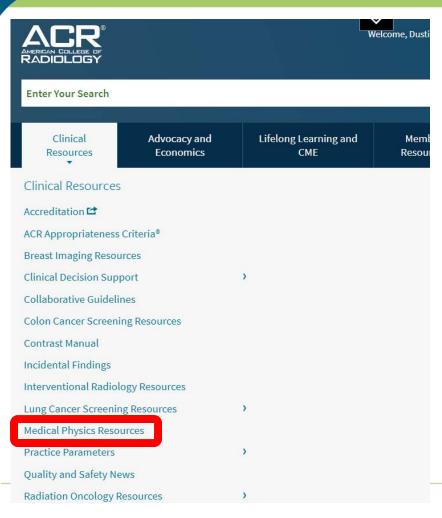
Cycle	2017-2018 (as of Se	2017-2018 (as of Sept. 2018)		2015-2016	
Specialty Society	Contributions	Rank	Contributions	Rank	
American Medical Association***	\$1,730,506		\$2,099,957		
Anesthesiologists (ASA)	\$3,933,104	1	\$3,959,260	1	
Orthopaedic Surgeons (AAOS)	\$2,297,866	2	\$2,569,244	3	
RADPAC	\$2,155,945	3	\$2,667,802	2	
Emergency Physicians (ACEP)	\$1,815,444	4	\$1,947,679	4	
Dermatologists (AAD)	\$1,314,513	5	\$1,423,564	5	
Ob-GYNs (ACOG)	\$1,031,960	6	\$1,191,575	6	
Ophthalmologists (AAO)	\$940,423	7	\$1,097,044	8	
Surgeons (ACS)	\$832,855	8	\$1,142,818	7	
Family Physicians (AAFP)	\$796,833	9	\$903,409	9	
Cardiologists (ACC)	\$694,991	10	\$717,771	11	
Radiation Oncologists (ASTRO)	\$283,891	18	\$299,685	19	
nterventional Radiology (SIR)	\$124,645	27	\$73,577	28	
FOTAL (Not including AMA)	\$21,143,493		\$23,534,333		

Strategic Plan

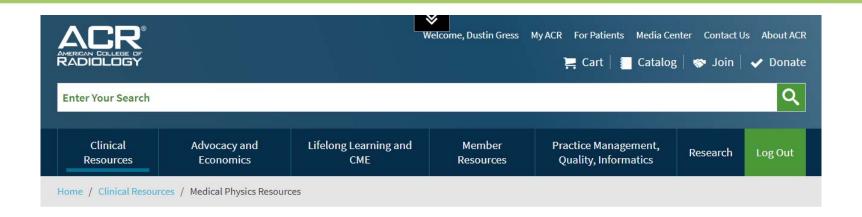
- Health Care Payment Policies & Practice Models
- Membership & Member Engagement
- Radiology & Patient-Centered Care
- Innovation & Research: Science→Practice & Policy
- External Relationships
- Data Science

For ACR Members in Physics





 https://www.acr.org/Clinical-Resources/Medical-Physics-Resources



Medical Physics Resources

These ACR resources, relevant to medical physicists, are both public and member-only and include ACR quality control manuals, ACR Accreditation resources, guidance documents, patient communication tools, and other helpful information.

Quality Control Manuals



RadiologyInfo.org

RadiologyInfo.org For patients

Search



ACR Well-Being Program

Are You Experiencing Burnout?

Assess your level of wellness and identify ways to prevent burnout

Take the first step to well-being »

< 000000>

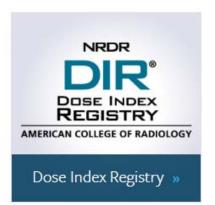


Accreditation

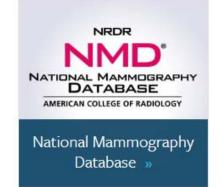






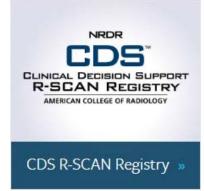










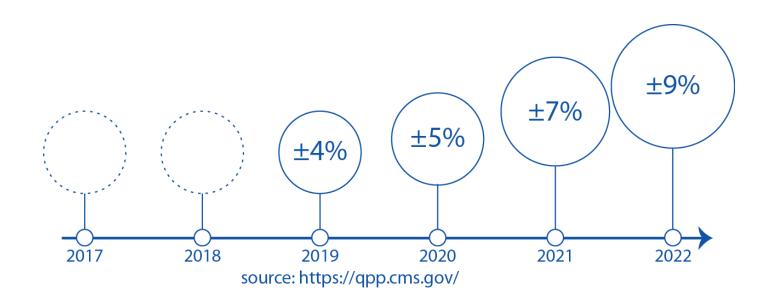


MACRA - 2015

- Implemented by CMS as the Quality Payment Program (QPP) starting January 1, 2017
- Under the QPP, clinicians can participate in either the Meritbased Incentive Payment System (MIPS) or in Advanced Alternative Payment Models (APMs) – positive/negative adjustments
- Legacy quality programs (PQRS, Value-Based Payment Modifier and Medicare EHR Incentive Program) streamlined into MIPS with new category, Improvement Activities



Zero-sum / budget neutral



What is a Quality Measure?

- Guidelines used to evaluate quality and cost-ofcare performance; they drive improvement, allow patients to make informed decisions, and are used to influence provider payment.
- Denominator: population being evaluated
- Numerator: # of "performance met" instances

DIR

QCDR Measure

ACRad 34

Measure Title

Multi-strata weighted average for 3 CT Exam Types: Overall Percent of CT exams for which Dose Length Product is at or below the size-specific diagnostic reference level (for CT Abdomen-pelvis with contrast/single phase scan, CT Chest without contrast/single phase scan and CT Head/Brain without contrast/single phase scan)

Measure testing

- Feasibility
- Validity
- Reliability
- Peer-reviewed publication
- Opportunity for medical physicists!

ACR 2018 DI QM #5

Percentage of patients aged 18 years and older with a diagnosis of urolithiasis or nephrolithiasis undergoing CT imaging exams of the abdomen or pelvis to evaluate for urologic stones undergoing only low-dose CT exams of the abdomen or pelvis without intravenous contrast

ACR 2018 DI QM #6

 Percentage of patients aged less than 18 years with a ventricular shunt undergoing cranial imaging exams to evaluate for ventricular shunt malfunction undergoing either low dose cranial CT exams or MRI

These are in your wheelhouse

Opportunity to provide value

Outline Summary

- How does ACR work?
- Where does ACR fit in the ecosystem of societies?
- ACR Strategic Plan
- Resources
- Quality Measures

Acknowledgements

- Mythreyi Chatfield, PhD
- Judy Burleson, MHSA
- Karen Orozco, CHES korozco@acr.org





R-SCAN (rscan.org)

- Team-based collaboration to limit waste of resources
- Move healthcare in the direction of CDS
- No cost
- Potential to expansion of model into registries

Thank you