

## Patient Advocacy Advisory Board Minutes

August 2, 2018

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**Attendees:** Stephen Schwartz; Tricha Shivas; Dorothy McGrath; Anita McGlothlin; Ramon Llamas; Jeri Francoeur; Linda Budzinski; Karin Brough; Wayne Powell

### 1. Commencement

Chair Stephen Schwartz called the meeting to order. No quorum was established. (Anita McGlothlin joined the call in progress.) The minutes of the June 23, 2018, meeting will be approved at a later date. S. Schwartz chose to table the discussion of the PED program and survey results until the next call.

### 2. Legislative Update

W. Powell provided the Committee these updates on relevant legislative and regulatory issues:

- In Canada, a coverage decision regarding Lutathera is open for public comment, with an August 14 due date. W. Powell indicated that input from patient groups would be helpful. He noted that the British NICE (National Institute for Health and Care Excellence) program is very thorough and very conservative in terms of what it approves for coverage and that they recently decided to approve Lutathera for coverage. He expects Canada to follow suit. This is mainly for NET and gastrointestinal issues.
- Washington State's Health Technology Assessment Program will issue an evidence summary on PET for Lymphoma coverage at the end of August with a 30-day public comment period. W. Powell explained that the process involves a board that reviews the evidence and develops recommendations. After the comment period there will be a public hearing or two and they will have an expert on the panel; however, the expert will not be allowed to speak unless directly asked a question. SNMMI will consider sending someone to provide verbal comments during these meetings. They do have an expert for the panel to question but the expert cannot fully participate in the deliberations. After the public comment period, the board will meet with Seattle-area doctors for further input. He encouraged patient groups to participate in the public comment process. S. Schwartz agreed to follow up with a comment letter from the Lymphoma Research Foundation.
- We commented on coverage policies for DatScan by FCSO in Florida and Anthem. We are awaiting word in Florida, but Aetna rejected our suggestions. We also commented on BCSA's national evidence summary on DatScan – and are waiting to see if they have accepted our suggestions.
- He mentioned that SNMMI is testing a new coverage policy monitoring service that tracks all changes to coverage. It can be searched by keywords and highlights those issues that are out for public comment all over the country. It also notifies users of coverage changes before claims start to be rejected. SNMMI will be closely monitoring coverage policies, with a focus on insurance carriers that cover 5 million patients or more. This will allow the Society to alert patient groups and solicit their support as coverage issues related to their disease areas arise. We are happy to work with payer groups to identify polices of interest to them throughout the country.



- The proposed physician payment rule for 2019 has been issued. The biggest change is in response to physicians' complaints regarding the amount of paperwork required for justifying their billing for office visits. CMS has ruled that only basic documentation is required, and they will pay all claims at a level 2. W. Powell stated that one potential problem with this is it could encourage primary care physicians to see as many patients as possible and reduce the amount of time they spend on each office visit. Specialists do not view this change favorably. This would have a minimal effect on nuclear medicine physicians because they bill for few office visits.
- Regarding payments for radiopharmaceuticals in a hospital outpatient setting, SNMMI will continue to advocate to allow separate billing for the higher value drugs. SNMMI Health Policy and Regulatory Affairs will be recommending that Medicare's national coverage decisions on PET procedures be reconsidered and liberalized. That process will include MITA and CORAR and begin this Fall.
- W. Powell encouraged PAAB Members to share any information on which coverage policies affect their constituencies. S. Schwartz stated that the PAAB needs to consider creating a subgroup charged with monitoring legislation that impacts its patient member groups.

#### **Patient Education Day**

L. Budzinski agreed that the PED program discussion be held on the next call with more members present. She reported that regretfully, the sessions were not recorded. This was due to a miscommunication and will be rectified for future events.

She thanked all the members of the PAAB for their input. The feedback on the event has been very positive and SNMMI leadership is very pleased with its success.

#### **Action Items**

- ***Patient Education Day*** S. Schwartz chose to table the discussion of the PED program until the next call.
- ***Legislative Update*** S. Schwartz agreed follow up with a comment letter from the Lymphoma Research Foundation.
- ***Legislative Update*** S. Schwartz stated that the PAAB needs to consider creating a subgroup charged with monitoring legislation that impacts its patient member groups.

**The meeting adjourned at 1:34 pm**