

## THE HCI SPOTLIGHT

Dear Colleague—

They are out! On March 31, 2011, the Department of Health and Human Services (HHS) released the new proposed rules that would preside over Accountable Care Organizations (ACOs). The proposed rules, which are now available for public comment at <http://www.regulations.gov>, encourage physicians, hospitals, and other caregivers to improve the safety and quality of patient care through linking payments to outcomes.



Robert J. Stillely  
President  
Heart Care Imaging, INC.

Heart Care Imaging takes pride in the ongoing relationships with many prestigious Academic Medical Centers (AMC). Future primary care ACOs will give these AMCs the role of a “center for excellence” for patients who require an area of expertise beyond the scope of what community ACOs can provide. We have already begun to see AMCs and community physicians come together in new organizational structures that deliver care more efficiently. Providing the most up-to-date imaging software that is capable of interfacing with electronic medical records across physician’s offices as well as hospitals is just one of the ways that HCI will strive to coincide with the efforts of our customers should they chose to transition into becoming an ACO. HCI also is an activist of facilitating ongoing open and constructive communication between sites of care, providers, and patients which is essential to any ACO. As I look at the topic of discussion from last May’s newsletter, I realize that our continuing “flexibility” will allow our labs to continue to provide the types of diagnostic services requested of our customers as the new health care reform may restructure the way they are required to provide health care.

Federal officials have provided a handy fact sheet on ACOs which can be viewed at <http://www.healthcare.gov/news/factsheets/accountablecare03312011a.html>.

Best regards,



## Obama Administration delaying some rules for appealing health insurance denials

**Summary:** Once again the rights promised to patients under the Affordable Care Act are being delayed. Insurers have an extended grace period until 2012 to apply new Affordable Care Act rules to their customers. The government posted the reason for this extension is due to the need to modify these rules in the near future. Among the rules now on hold are: A requirement that insurers must provide consumers with specific details, which would include diagnostic codes used by doctors, hospitals and insurers, about what treatment isn't covered and why. Hopefully these continual delays don't mean that it won't happen.

<http://www.latimes.com/health/la-he-health-insurance-appeals-20110330,0,2873291.story>

## Lantheus gets FDA greenlight on F18-PET agent trial

**Summary:** Is PET imaging with flurpiridaz F-18 better than technetium-99m sestamibi SPECT for CAD detection? The FDA has approved the phase III clinical trial for this assessment. Specifically, the diagnostic efficacy (sensitivity and specificity) of flurpiridaz F-18 when compared with SPECT MPI. These results may have the potential promise of more accurate evaluation of patients with cardiovascular disease that could result in better patient care and outcomes and may ultimately help control healthcare costs.

[http://www.molecularimaging.net/index.php?option=com\\_articles&view=article&id=26716:lantheus-gets-fda-greenlight-on-f18-pet-agent-trial&division=mii](http://www.molecularimaging.net/index.php?option=com_articles&view=article&id=26716:lantheus-gets-fda-greenlight-on-f18-pet-agent-trial&division=mii)

## New appropriateness criteria continue ACC/ASE efforts to minimize echo misuse

**Summary:** The appropriate-use criteria (AUC) for echocardiography will expectantly allow it to escape the fate of other imaging modalities....pre-authorizations! The AUC found that about 13% of transthoracic echo tests during a 35-day study period were classified as inappropriate. The most common inappropriate use was the suspicion of endocarditis. There is always going to be some number of inappropriate echos, but that number shouldn't be more than an optimistic 5%. Current collaboration between major cardiology societies and insurance companies will encourage the use of the AUC to determine coverage instead of a third-party benefits-management company to preauthorize echocardiography tests.

<http://www.theheart.org/article/1203489.do>

## JNC: SPECT with half-time, half-dose superior to full-time

**Summary:** A study at Columbia University shows imaging quality of half-time or half-dose is equivalent to that of a full-time or full-dose nuclear stress test. This is achieved by wide-beam reconstruction (WBR) software that uses resolution recovery and noise modeling to cope with decreased SPECT count statistics. Because WBR processing reconstructs half the usual SPECT count statistics, image quality equivalent to a full-time scan (12-14 minutes) could be achieved with either half the time or with half the radiopharmaceutical activity. Benefits include a faster scan time for elderly uncooperative patients and a reduction in radiation exposure for younger patients.

[http://www.healthimaging.com/index.php?option=com\\_articles&view=article&id=26977:jnc-spect-with-half-time-half-dose-superior-to-full-time&division=hiit](http://www.healthimaging.com/index.php?option=com_articles&view=article&id=26977:jnc-spect-with-half-time-half-dose-superior-to-full-time&division=hiit)

## Hardware, software advances spark cardiac SPECT progress

**Summary:** After remaining relatively stagnant for more than 50 years, the basic design of SPECT cameras has taken a quantum leap: Innovative developers have brought hardware and software improvements to the technology to reduce scan time and allow users to better control the amount of radiotracers given to patients.

[www.auntminnie.com/index.aspx?d=1&sec=sup&sub=car&pag=dis&ItemID=94395&wfv=1236](http://www.auntminnie.com/index.aspx?d=1&sec=sup&sub=car&pag=dis&ItemID=94395&wfv=1236)

## Americans falls short of “ideal” heart health

**Summary:** The AHA released the “Simple 7” ([www.heart.org/mylifecheck](http://www.heart.org/mylifecheck)) criteria for maintaining ideal heart health. This checklist includes: 1) Being physically active 2) Not smoking 3) Healthy weight 4) Healthy diet 5) Normal cholesterol 6) Normal blood pressure 7) Normal blood sugar. Only 1 in 2,000 middle-aged Americans meet these criteria! The AHA has set a goal to reduce deaths from heart disease by 20% by 2020.

<http://www.reuters.com/article/2011/03/04/us-americans-heart-health-idUSTRE72372J20110304>

## Diet and exercise best for improving physical function

**Summary:** This article is a wonderful reminder about a common problem: age-related muscle degeneration. The current study suggests that weight loss alone or exercise alone can reverse frailty, but that the combination of weight loss and exercise is more effective than either individual intervention.

<http://www.theheart.org/article/1203405.do>

## Working long hours? Watch out for your heart

**Summary:** During this 11-year study, 192 participants had heart attacks. Those who worked 11 hours or more a day were 67 percent more likely to have a heart attack than those with fewer hours. This may be a wake-up call for those who overwork themselves.

<http://www.reuters.com/article/2011/04/04/us-heart-work-idUSTRE7336RS20110404>

## More data on diabetes risk with statins

**Summary:** New analysis of Lipitor suggests THE MORE POWERFUL THE STATIN, THE HIGHER THE RISK OF DIABETES. However, the benefits of statin treatment still clearly outweigh the risks. Moreover, if patients do a better job at increasing their exercise and improving their exercise habits, their glucose levels likely will improve. Consequently, physicians would not have to alter the use of statins.

<http://www.theheart.org/article/1203383.do>

## Americans not ready to use social media to talk to their doc

**Summary:** Only 11% of respondents said they would take advantage of social media such as Twitter or Facebook to communicate with their doctor and 20% said they would use chat or instant message. Respondents were, however, more favorable toward conferring with their doctor via e-mail (52%), online appointment setting (56%), online access to their medical records (50%) and online bill payment (48%). Like it or not, look for these numbers to rise significantly in the future - social media is becoming a way of life, and I believe our level of comfort with using social tools for interactions like doctors visits will be increasingly normal.

<http://healthcareitnews.com/news/poll-84-percent-americans-wouldnt-use-social-media-talk-their-doc>

## Regular Fasting May Boost Heart Health

**Summary:** Researchers found that people who fasted regularly had a 58% lower risk of coronary disease compared with those who said they didn't fast. They suggest that the effects of fasting from food on a regular basis leads to metabolic changes that are good for the heart. The downside of the study is that it didn't ask for specific details on the type and duration of fasting among the patients. Additional researched is planned to more thoroughly assess the potential health benefits of regular fasting.

<http://well.blogs.nytimes.com/2011/04/04/regular-fasting-may-boost-heart-health/>