In Praise of Diversity and Teamwork

One of the great assets of the TRS is the diversity of our members. Radiology practices are remarkably different in Texas, with wide variation in facilities, equipment, referring physicians, and types of patients. To be relevant, we must maintain a clear perspective of the needs, values and goals of our members, and therefore, we need broad representation from members from different locations and practice types, with different ages, genders, cultural backgrounds, training, and skills. My interest in becoming active in the TRS was fueled by the generous and welcoming atmosphere that I experienced at TRS meetings, where I had the opportunity to share ideas and experiences with radiologists who I might never have come to know through any other mechanism. I suspect that many of you feel the same.

The challenges that accompany a diverse membership in a large state are many. Providing opportunities for members to get together to find solutions to individual and common issues can be costly and difficult to schedule. The TRS annual meeting provides such an opportunity, but how do we sustain the interactions and momentum that are initiated at the meeting throughout the year? How do we collate the many opinions and ideas that we have into a cohesive plan of action, and how do we speak with a unified voice when trying to educate the public and our State legislators about our profession? How do we use TRS resources to support the goals of such a diverse group? How do we keep track of our members and communicate with them effectively? These are just some of the questions that a TRS task force tried to answer during our Strategic Planning Retreat this past August.

Although the action plans that were developed during the retreat will take some time to put into motion, some immediate benefits of our retreat became apparent. Our task force consisted of a diverse group of members and leaders, and despite significant differences in opinion and experience within the group, we were able to work together to create a mutually accepted set of goals and plans in a short period of time. This is the essence of teamwork. Putting our plans into action will require the engagement of different teams of TRS members, and we hope that many of you will be willing to participate.

In this newsletter, you will hear about some of the issues that the TRS will be addressing in the near future. Although the next regular Texas Legislative Session will not convene until Jan. 10, 2017, it isn’t too soon to begin to plan our strategies. Balanced billing will be back on the stage, and you can read about our plans to address this issue in the article by Dr. Shah (see page 4). TRS members will need to work with physicians of other specialties who will also be affected by this legislation, and the Texas Medical Association provides a forum for such interactions. Several TRS members (Drs. Childs, Menendez, Strax, Avery) have been working actively...
Sizzling fajitas, military bands, flamboyant parades, and mariachi music await you in San Antonio for the TRS 103rd Annual Meeting. This year, our meeting will be held during Fiesta: an extravagant city-wide party celebrating San Antonio’s rich and diverse cultures. Our venue, the Westin Riverwalk Hotel, is just steps away from the center of the festivities! Bring the whole family and join in on the fun!

Robust educational programs have been planned for diagnostic radiologists, radiation oncologists, medical physicists, and residents alike. Top speakers from around the state and across the country have been invited to bring you the most up-to-date information on the latest advances and technologies. Vendors will be in attendance to showcase their newest products and useful services. The audience response system and Break the Case topics will keep the sessions engaging, interactive and fun, all while getting your SAM, ethics and modality credits.

And, of course, we have built in plenty of time for you to reconnect with old friends and colleagues in a relaxed setting. A welcome reception is planned for Thursday evening. On Friday night, we will have our Awards Banquet where, among other things, we will honor our 2016 TRS Gold Medal recipient, Dr. Gregory C. Karnaze, and award our 2nd annual Guibertseau Award for Resident Excellence. On Saturday evening, you’ll be on your own to take part in the Fiesta festivities. You won’t want to miss the 68th annual Fiesta Flambeau® Night Parade at 7:15 pm. It is one of the largest illuminated parades in the United States. Traversing more than 2 miles through downtown San Antonio, it is truly amazing!

The TRS 103rd Annual Meeting is sure to be a spectacular meeting. Register today by visiting www.txrad.org/meeting.html.

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Diagnostic Radiology Program Highlights
Roy Riascos, MD, Program Committee Chair

The 103rd Annual Meeting promises a full array of educational sessions that will improve your diagnostic skills and keep your clinical game at its sharpest. Topics will include Gynecological Cancers, MSK, Body Imaging, Neuroradiology, IR and Spine Intervention. We have also included practice management lectures that will help you and your practice tackle the many challenging issues that our industry is currently facing.

Creating a culture of Quality and Safety in Radiology by Dr. Kimberly Applegate, the Charles Craig Lecture by Keith Chew; and the Moreton Lecture Brain Tumor Update 2016 by Dr. Anne Osborn are not to be missed! Radiology Leadership Institute (RLI) sessions continue in this year’s program, helping you gather valuable RLI credit towards your certification. SAM credits that count towards your Self-Assessment (SA-CME) requirements for Maintenance of Certification and modality credits for accreditation purposes will also be available.

Guest presenters include Dr. Clyde Helms, Dr. James Brink and Dr. Gilda Cardeñosa. We will also have an update on the ABR by Dr. Milton Guibertseau; and Dr. Jason Morrow will present the TRS Ethics Lecture on Professionalism and Medical Ethics. The program also incorporates top Texas teaching faculty who are experts in their respective fields. We look forward to seeing you in San Antonio, Texas, April 22-24, 2016!
The combined Radiation Oncology and Medical Physics program once again promises to be an exciting and educational experience for all radiation oncology and medical physics members and residents.

Friday, April 22nd, we kick off the meeting with an integrated joint session. The diagnostic radiologists will begin by focusing on gynecological cancers and interventions as well as radiation safety issues in pregnant patients. The lectures will include discussions and unknown case presentations of gynecologic cancers and interventional radiology in pregnancy-related complications. These lectures are complemented by our own Dr. Snehal Desai highlighting the various aspects of multi-modal imaging for diagnosis, treatment and staging in cervical cancers followed by a presentation by Dr. Louis Wagner on radiation safety issues with pregnant patients.

On Friday afternoon, Dr. Caroline Chung will be discussing brain metastases, followed by a physics lecture presented by Dr. Niko Papanikolau on how to plan and treat patients with multiple brain metastases. This is further enhanced by a discussion regarding multidisciplinary management of primary and metastatic lesions of the spine by Dr. Michael Folkert.

Our visiting professor this year is Dr. Akila Viswanathan, Director of Gynecologic Radiation Oncology at Dana-Farber/Brigham and Women's Cancer Center in Boston. Dr. Viswanathan will address the treatment of gynecologic tumors with a focus on HDR Brachytherapy. In addition, she will conduct a critical review of gynecologic tumor research presentations by residents and she will lead the Interesting Case Review series.

Lastly, in addition to several excellent radiation oncology resident research presentations on both Friday and Saturday, medical physicist Dr. James Yang will be discussing the application and technical challenges of treating spinal lesions with SBRT. Dr. Gutierrez will then end the program with a Physics Board Review session.

We hope you will join us for this very exciting program in San Antonio!

2016 TRS Gold Medal Recipient

Gregory C. Karnaze, MD, FACR will receive the TRS Gold Medal for his significant contributions to the betterment of the financial affairs of the Texas Radiological Society in his role as TRS Treasurer, among other things. He can be credited with ramping up the exhibitor program as a significant source of revenue, thus ensuring that the TRS annual meeting is closer to being self-sustaining. If only the United States Treasury could find a person as dedicated to fiscal responsibility as Dr. Karnaze!

In Praise of Diversity and Teamwork (continued from front page)

as members of the TMA, collaborating with other specialties to address common issues such as the balanced billing initiative. We encourage other TRS members to consider becoming active in the TMA, so that we can have even broader representation.

Controversies will continue to arise in healthcare, such as the new mammography guidelines discussed in the article by Dr. Roberts (see page 7). Radiology is vital to so many aspects of medicine, and we need to be at the table when policies are developed. The TRS is grateful to have members who keep us informed and will join teams who can represent our practices and patients. We are working on ways to get to know all of you better, so that we recognize the diverse characteristics of each of our members and can engage everyone in our team efforts. We value your contributions to the TRS and to radiology, and we look forward to working with you in 2016.
The Coming Balanced Billing Storm
Rajeev Shah MD, MBA

Most of us who have been practicing for any length of time have been confronted by policy battles that have the potential to impact the quality of care we provide our patients. It was only a decade ago that physicians banded together to pass meaningful tort reform. Ten years ago, a crisis affecting physician practices created a bond that brought all physicians together to force the legislature to pass tort reform. That victory has had a profound effect on all of our practices, and it has changed the face of medicine in this state to the benefit of patients, physicians, and all Texans.

Now radiologists – indeed, all physicians – are again facing a serious public policy crisis in the form of balanced billing that could radically impact our ability to provide care to the patients who need it. You may have read or seen the media accounts: accusations of surprise bills for patients who visit the ER, outrageous charges for seemingly minor procedures, the consumer being mauld by out-of-network charges when they are balance billed for services provided. These misguided descriptors from consumer groups make physicians look and feel like villains, which is far from the truth. And, unfortunately, these so-called consumer advocates seem to be gaining the upper hand.

Balance billing is the practice of a healthcare provider billing a patient for the difference between what the patient’s health insurance chooses to reimburse and what the provider charges. When a medical provider is part of an insurance network, she/he agrees to offer discounted rates on services. Out-of-network providers are not bound by this agreement. The insurance company still sets a dollar limit on how much they will allow for services from these non-network providers, but the patient can end up with a much higher bill for the balance of the charge. This situation can occur via informed consent – when the patient elects to seek help from a non-network provider – or inadvertently, while receiving care for emergencies or even within in-network hospitals from out-of-network providers. In the latter instances, services are provided by non-network providers when there is a lack of agreement between the insurance plans and the providers on terms of a contract, yet the insurance is offered to patients for services at the facility.

While physicians vigorously advocate for their patients, we also need to be compensated fairly for our services. This is becoming more difficult in the present environment of declining reimbursements. Therein lies the complexity of this issue that threatens to separate patients and consumer groups, physicians and non-physician providers, and insurance companies into different camps. A solution fair to all is needed.

Balance billing is not a Texas-only problem, but a national issue. States such as California, New York, Florida, Maryland and others have state laws addressing this problem. Recently, physicians in California convinced their legislators to narrowly defeat (by four votes!) an effort to prohibit balance billing entirely. Several other states have recently enacted serious restrictions on our ability to charge market rates for our highly specialized services.

The insurance community is organized and actively lobbying. The National Association of Insurance Commissioners, whose members regulate health care insurance in states, recently adopted a policy position to ban out-of-network billing for providers. These lopsided positions will hurt patients and physicians alike.

Texas already has balance billing laws protecting consumers in certain circumstances. If an across-the-board balanced billing ban is enforced, thus restricting our ability to receive fair compensation for our services, it would shift the balance of our negotiating power to the insurance companies. The plans could decide which physicians or groups would be included in their ever-narrowing networks and ultimately whether or not you will be paid for your services.

This issue has been discussed for many years, but it is rapidly reaching critical mass in Texas. During the 2015 session, several bills were filed that would have impacted our payment, including legislation to prohibit balance billing entirely. It required significant time and effort from the members of TRS, our lobbyists, and the unified effort of other physician groups to barely defeat these bad public policy efforts. Even though the legislature has adjourned, the issue and our opponents have not gone away. They have only gotten louder and more
Balanced Billing Storm (continued from page 4)

insistent in their efforts. Several Texas legislative committees have recently announced their intent to study the out-of-network issue in 2016 in order to formulate policy recommendations for the next legislature in 2017.

The leadership of TRS has recently convened a taskforce of 10 individuals to carefully analyze these issues on behalf of the membership with the stated goal of developing solution-oriented policy initiatives in preparation for the 2017 legislative session. We will be working diligently with other stakeholders to find opportunities to improve the process. The taskforce will keep TRS members informed and engaged regarding these issues. Ultimately, we will need the help of many radiologists to educate our state legislators, US Senators and Representatives – and any other policymakers we know – that efforts to tilt the balance of power to health plans by prohibiting balance billing is not good for patients, physicians or the delivery of health care altogether. More information on how to help will be forthcoming from the TRS as deliberations progress.

Join the TRS PAC Today!

Please return this contribution form along with payment to:
TRS PAC • 6705 Hwy. 290 W. • Suite 502-243 • Austin, TX 78735 • or fax to (512) 276-6691

Name (please print): _________________________________
Phone: _________________________________________________________________________________________
Email: ___________________________________________________________________________________________

I would like to make a contribution to the TRS PAC in the following amount for the Fiscal Year 2016:
☐ $100 ☐ $250 ☐ $500 ☐ $750 ☐ $1,000 ☐ Other: ____________________________
☐ Check (made payable to "TRS PAC")
☐ Credit Card: ☐ Visa ☐ MasterCard ☐ American Express

Card Number: ____________________________ Expiration Date: ____________________________

Billing Address: __________________________________________________________________________________
Billing Zip Code: ____________________________ CVS Code: ____________________________
Name on Card: _____________________________________________________________________________________
Signature: _________________________________________________________________________________________

Contributions to TRS PAC are strictly voluntary and can be made from a PA, PC or LLP, but cannot come from any corporate source. Contributions are voluntary and are not tax deductible. All contributions will be reported to the Texas Ethics Commission in accordance with state law.

Sign up to Participate in R-SCAN™ Today

Radiology Support, Communication and Alignment Network or R-SCAN™ is a new ACR initiative that brings together radiologists and referring clinicians to collaboratively improve imaging utilization. Participating in R-SCAN can position you for the future of value-based health care—where reimbursement will be directly tied to providing concrete data that demonstrates our role in the delivery of better patient care at lower costs. Participation in R-SCAN is free—both for radiologists and for ordering clinicians. A step-by-step guide available on rscan.org leads you through the process of improving the ordering of appropriate imaging exams based on Choosing Wisely recommendations. When you sign up to participate in R-SCAN, you’ll also gain free online access to a customized version of the ACR Select™ clinical decision support tool, which is based on the ACR Appropriateness Criteria®. Using these tools, you can rate the appropriateness of exams ordered and create project reports. Visit rscan.org for more information and sign up today!

Star Radiology Groups

The TRS would like to recognize and thank the following radiology groups, who believe in the missions of the ACR and TRS enough to pay dues on behalf of their members:

Austin Radiological Association
Bryan Radiology Associates
Diagnostic Imaging Associates
Houston Radiology Associates
Radiology and Imaging of South Texas
Radiology Associates of Beaumont
Radiology Associates of North Texas PA
Radiology Associates of San Antonio PA
Radiology Associates of Wichita Falls
Radiology Consultants LLP
Radiology Partners/CIRPA
South Texas Radiology Group
Synergy Radiology Associates PA
Texarkana Radiology Associates
Texas Radiology Associates LLP
University of Texas Medical Branch
Valley Radiologists & Associates
Victoria Radiology Associates

To set up group billing for your group’s members, please contact the ACR’s membership department at (800) 347-7748 or email Barney Lau at BLau@acr.org.
The TRSF Mission Marches On
I. Ray Kirk III, MD, FACR

I’m proud to report that in less than three years the TRS Foundation has accomplished much to fulfill its mission of supporting the educational interests of the TRS. We continue to develop our programs to serve our members and members in training. In fact, last year we supported many programs of value to our membership.

In January, 2015, TRSF sponsored Evans Heithaus, MD, a resident at Baylor University Medical Center, to participate in the prestigious Rutherford-Lavanty Fellowship in Government Relations at American College of Radiology (ACR). In March, TRSF sponsored several lectures at the TRS Annual Meeting, including the keynote Radiation Oncology Lecture, the Moreton Lecture, the Charles Craig Lecture, and the Radiology Leadership Institute (RLI) Lecture. Also during the TRS Annual Meeting, TRSF presented the first annual Guiberteau Award for Resident Excellence to Bradley Carra, MD of the San Antonio Uniformed Services Health Education Consortium Diagnostic Radiology Residency Program. In August, TRSF provided scholarships for three practicing radiologists to attend the Radiology Leadership Institute Leadership Summit at Babson College. In October, TRSF sponsored Melissa Chen, MD, a fellow at Baylor College of Medicine, to participate in the James M. Moorefield Fellowship in Economics & Health Policy at ACR.

As we look forward to the New Year, we ask that you consider how you can help the TRS Foundation impact radiology in Texas and the communities we serve. There are many important ways that the TRS Foundation can support radiologists in Texas, but we need your help! Maybe you are interested in making a Legacy Society gift so you can start seeing the benefits of your generosity today? The Legacy Society honors major gifts of $50,000 and above. In return, it would be our pleasure to commemorate this lasting legacy by attaching your or your group’s name to a lectureship, fellowship, or other appropriate entity supporting the mission of the TRS Foundation. For example, you or your practice may want to memorialize a prominent leader in Texas radiology. Various donation levels may be found at www.trsfoundation.org. Ongoing contributions of any amount are also welcome. Texas has nine radiology residency programs and there is more demand for our popular fellowships and scholarships than we have the funding to support. These programs are critical to the future success of radiology in Texas as they further develop the leadership skills and other expertise required to thrive in healthcare today.

The TRSF Foundation will need to double its size in the coming years in order to provide the support we need for our society. Your tax deductible contributions are diligently invested in this effort with very low administrative expenses. We greatly value each dollar received and welcome any opportunity to discuss your consideration for a meaningful donation to the TRSF.

On behalf of Texas Radiology, thank you for your support!

These programs are only able to be offered because of donations from radiologists like you; radiologists who value our profession and are dedicated to continuing radiological excellence in Texas for years to come. Help us to maintain and grow this valuable asset for the TRS. Please consider giving a tax-deductible donation of any amount to the TRS Foundation today. Please use the form on page 7.

3 TRS members were awarded scholarships to attend the RLI Summit.
New ACS Guidelines on Mammography
Sidney C. Roberts, MD, FACR, editor

Late last year, the American Cancer Society released new guidelines indicating women should begin mammograms at age 45 instead of age 40, and have them less frequently. Also included in the guidelines is the recommendation that clinical breast exams are no longer necessary unless a patient has symptoms of an abnormality in the breasts.

As reported by the Dallas Morning News, “A general explanation of the reasoning behind the new guidelines is that breast cancer is not common enough in women under 45 to make mammograms worthwhile for that age group, but that the risk of the disease increases enough to justify screening once a year after that. The risk keeps increasing slowly with age, but by 55, when most women have passed through menopause, tumors are less likely to be fast-growing or aggressive, and breast tissue changes in ways that make mammograms easier to read — so screening every other year is considered enough.”

This topic has sparked a controversial debate between a number of advocacy groups, physicians and experts alike. Our very own Dr. Phil Evans weighed in on the topic in an article for the Dallas Morning News. “This is the first time that guidelines have taken into strong consideration the balance between benefits and harms.”

Ultimately, these mixed signals are leaving women and their doctors to “sort out conflicting messages and figure out what makes the most sense” for their situation.

Dr. Mike Ulissey commented on the topic in a news story for the Seattle ABC affiliate by saying he “will ignore the new recommendations and insist that his patients get mammograms at age 40.” His rationale is explained further at [www.auburn-reporter.com](http://www.auburn-reporter.com), search term, Mike Ulissey.

More information, including an editorial and articles on the changes, can be found on the American Cancer Society website, [www.cancer.org](http://www.cancer.org).
The Benefits of Your Membership

Happy New Year! We send our warmest wishes and thanks to all of you for being part of the TRS. The New Year is a time for reflection, renewal and planning for the year to come.

Your TRS was quite active in what turned out to be a very busy and productive year.

- In March, the TRS signed the AMA’s Sustainable Growth Rate (SGR) fix letter. Additionally, the TRS coordinated efforts for Texas radiologists to contact their US representatives to vote in favor of the Medicare Access and CHIP Reauthorization Act (HR 2). This effort, combined with larger statewide and national efforts, ultimately led to the repeal of the flawed Medicare SGR payment policy.

- The TRS ensured that radiology had a voice in important Texas regulatory bodies by soliciting applicants to serve on Texas Medical Board’s (TMB) Medical Rad Tech Board and Medical Physics Advisory Committee.

- In August, TRS efforts contributed to the decision by BCBS Texas to include Breast Tomosynthesis coverage.

- TRS representatives attended a productive meeting with HHSC staff in September.

- Also in September, the TRS had two members represent radiology at TMA’s Medicaid Congress.

- The TRS coordinated with Texas radiologists to ask their US legislators to protect early detection screening for mammography in November.

- On the legislative front, Imperium Public Affairs, our TRS lobbying firm, along with many of your TRS colleagues, worked diligently during the 2015 legislative session to protect the interests of TRS and its members. These efforts included the successful transfer of medical physics licensure from the Department of State Health Services (DSHS) to the Texas Medical Board (TMB); protected the rights of physicians to be paid fairly by balance billing; pursued Radiology Assistant Licensure; and secured more money and resources for Graduate Medical Education.

For 2016, we are ramping up for a busy year full of opportunities for you to get maximum value from your TRS membership.

- Affordable Dues. Yes, it’s dues renewal time, and the TRS wants to assure you that you are still getting an amazing value from your membership: dues are no higher than $200. Renew your TRS and ACR dues today at www.acr.org/renew or contact the ACR’s Membership Department at 1(800) 347-7748.

- Uniting Members. The View Box, our bi-annual newsletter, provides you with relevant and timely information affecting your practice. Furthermore, there is a unifying force behind the newsletter to bring our membership together to educate and to create common support on current issues.

continued on page 9

Automatically Renew Your Membership

One more way to simplify your life this New Year! The ACR now has an automatic renewal option for ACR and TRS dues. If you’re a member who highly values your ACR and TRS membership, consider opting into the automatic membership renewal. Rest assured that you will continue to receive your membership benefits on autopilot and you can cancel at any time.

Sign up for the automatic renewals via the printed ACR membership form or online at www.ACR.org.
Benefits of Membership (continued from page 8)

• **Legislative Representation.** The regulatory and legislative arena is by far the area where your membership is worth its weight in gold. TRS lobbyist Michael Grimes, with Imperium Public Affairs, is our watchdog in Austin, and his efforts, along with those of many of your TRS colleagues, have directly affected you in a positive manner.

• **High Caliber Annual Meeting.** Attendees and speakers alike rave that the quality of our meeting is on par with those of some of the most renowned national organizations, but at half the cost! 2016 is no different. There are more than 50 sessions on timely and highly relevant topics for no more than $500. Exciting, fast-paced twenty-minute sessions keep things moving and on topic. And, you can complete 20 hours of your annual CME in one weekend.

  
  
  *First time attending. Enjoyable conference. Easy CME. Great way to discuss issues central to Texas Radiology*

  
  *The support the TRS provides for resident members is overwhelming. There was a definite unique personal touch at the TRS meeting.*

  
  *Good mix of review and applicability to everyday practice needs.*

  
  *Great diversity in topics, excellent lectures.*

  
  *Great way to meet peers. High quality CME for low cost.*

  
  *Very good intra-state CME for general radiologists.*

  
  *An excellent program! Meeting is always pertinent.*

  
  *Some of the past attendees agree, saying:*

  
  Few specialty society organizations can show such a direct benefit of membership as the TRS. Join us in toasting the New Year! Here’s to a fruitful and productive year full of many more memories.

**TRS Resident & Fellow Section Update: The Foundation to a Successful Future**

Kevin Kadakia, MD, PGY-3, University of Texas Southwestern Medical Center

Radiology is changing at a rapid pace, but with all the change in delivery, reimbursement, and technology, much of the foundation has stayed the same. I still remember my first day as a radiology resident. My chairman, known for his emphasis on research and operations, said that we are first and foremost here to train to be expert clinical radiologists; everything else will come later. I remember being taken aback. But as I interact with more radiologists, both private and academic, I am beginning to understand why he emphasized that nothing else that we do (research, quality improvement, or information technology) should come at the sacrifice of our interpretative skills.

I was curious if radiologists in the private sector felt the same way, so I spoke to three private practice radiology groups to understand where they believe the emphasis should lie. These groups differed vastly in size and technology ownership. Although they had individuals in their practice who focused on reducing costs, improving turnaround times, and lobbying for political change, they unanimously expressed that radiologic interpretation should remain at the heart of what we do. Specifically, they wished young radiologists felt more comfortable with all types of exams, particularly those outside his or her fellowship specialization. They also stressed the significance of on-the-job and lifelong learning. The ability to pick up new modalities was of particular importance.

Two groups felt that because on-the-job procedural training is difficult, they wished residents had more exposure to procedures early on in their education. Lastly, they all agreed that moonlighting provides an excellent opportunity to increase familiarity with case variety and case volume.

Overall, they echoed my chairman’s sentiments. The foundation of radiology — accurate interpretation and the ability to effectively communicate those results — should be at the heart of radiology training and is essential to a productive, successful career.

Welcome New TRS Members

Thanks to the following members who joined the TRS between July 1, 2015 and December 31, 2015:

Behrang Amini, MD, PhD
Daniel R. Backlas, MD
Deep G. Bassi, MD
Gregory K. Bell, MD
Colin Brown, MD
Sarah G. Chandler, MD
Marcela Contreras, MD
Lane F. Donnelly, MD
Khaled M. Elsayes, MD
Janet Ching-Mei Fong, PhD
David T. Feltzer, MD
Julia R. Fielding, MD
Michael A. Foster, MD
Christopher J. Friend, MD
Monali Gupta, MD
Steven Li-Wen Hsu, MD
Rehul Jasti, MD
Amita Kamath, MD
Naveen Kankanala, MD
Edwin H. Kim, MD
Jonathan A. Kini, MD
Albert R. Klekers, MD
Michael E. Knapp, MD
Michael J. Lanoux, MD
Apryl S. Mensah, MD
Jay R. Parikh, MD
Lucho L. Rossman, MD
Faisal A. Sami, MD
Elmer B. Santos MD, PHD
Jessica K. Sheets, MD
Hilda Tso, DO
David Wan, MD
Olena O. Weaver, MD
Paul Wheeler, MD
Zerrin F. Yetkin, MD
In Memoriam

The Texas Radiological Society regrets the loss of the following members, and extends condolences to their family, friends and colleagues.

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<tr>
<th>Name</th>
<th>City</th>
<th>Date</th>
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<tr>
<td>J. E. Albright, MD, FACR</td>
<td>Corpus Christi</td>
<td>7/21/15</td>
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<td>John H. Grimm, MD</td>
<td>Kerrville</td>
<td>7/13/14</td>
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<tr>
<td>Glenn M. Jones, MD, FACR</td>
<td>Lubbock</td>
<td>7/6/14</td>
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<tr>
<td>Ivan D. Siddons, MD</td>
<td>Dallas</td>
<td>6/14/15</td>
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EDWARD B. SINGLETON

Dr. Edward B. Singleton, age 94 years, died on January 10, 2015. Dr. Singleton was the first physician hired at Texas Children’s Hospital in 1952 and led the pediatric radiology department there until 1994. He had an illustrious career in radiology and received numerous honors, among them being named a Legend in Medicine at UTMB Galveston, where he also received the Ashbel Smith Distinguished Alumnus Award. He was a Gold Medalist of the American Roentgen Ray Society, the American College of Radiology, RSNA, the Houston Radiological Society, the Society for Pediatric Radiology, the Society of Gastrointestinal Radiology (Cannon Medal), and the Texas Radiological Society. During his decades of service, he authored 7 medical books and more than 130 scientific articles. Dr. Singleton will be missed for his leadership, his insightful opinions, and his passion for the field.

GERALD DODD JR.

Gerald Dewey Dodd, Jr., M.D., of Houston, died on Friday, September 25, 2015, at age 92. Dr. Dodd had an enormous impact on the field of radiology, especially in the fields of Breast Imaging, Gastrointestinal Imaging, and organized radiology, that continues to reverberate throughout contemporary medicine.

Dr. Dodd was instrumental in building the Division of Diagnostic Radiology at the M.D. Anderson Cancer Center in Houston, Texas. One of his greatest accomplishments during his career was the standardization of the use of mammography for the detection and diagnosis of breast cancer. His efforts had international impact and led to his receipt of the UICC Muñoz Athayde Cancer Prize as well as the honor of a named lectureship in the Society of Breast Imaging.

Throughout his lifetime, Dodd received a number of prestigious awards and served in numerous local, state, and national professional organizations.

HHSC Meeting Proves Valuable

On September 19, 2015, TRS Executive Director Renita Fonseca, Dr. Zeke Silva of the South Texas Radiology Group and Dr. Rob Milman of Austin Radiological Association attended a meeting between the TRS and a number of Health and Human Services Commission (HHSC) clinical policy specialists, including coders and RN clinical policy experts. The purpose of the meeting was for HHSC to learn more about radiological services and CPT code-related matters.

Overall, the discussion was very positive. The topic of commenting on necessary coding corrections prompted additional conversation between the groups. Dr. Silva, who also serves as the ACR Relative Value Scale Update Committee (RUC) Advisor, was a valuable resource and handled most of the coding-related questions. Dr. Milman has lectured extensively on patient centered care and clinical decision support. He provided valuable perspectives on these topics.

Additional discussion also took place regarding patient-centered activities of radiologists. The TRS stressed its commitment to working with the Commission on matters important to the care of the Medicaid/CHIP beneficiaries in our state.

The questions from HHSC were appropriate; most were focused on the nature of radiology services, CPT coding, site of service differences, and supervision requirements for technologists.
Medicaid Congress Vows to Cut Medicaid Hassles

On October 16, TRS members Dr. Adam Ratner and Dr. Rob Milman tackled tough issues surrounding Medicare at the Texas Medicaid Congress meeting. According to the Texas Medical Association weekly newsletter, EVPGram, San Antonio radiologist Adam Ratner, MD, captured the frustration of the physicians from all specialties in the room by asking a simple question with a very complicated answer: “Why can’t we just make this all simpler?”

The million dollar question. Dr. Ratner offered a summary of the session, saying that while it’s clear that the TMA is aware of most of the challenges that Texas physicians and their practices must endure, he worries that we in the TMA aren’t advocating as clearly, passionately and effectively for our patients. Patient advocacy, he warns, should not take a backseat to defensive tactics.

“It’s like unraveling a bowl of spaghetti,” said Chris Traylor, whose administration of the $30 billion-a-year program is bound by federal and state laws and dozens of contracts with Medicaid HMOs.

Though Dr. Ratner’s question was not resolved, members of the congress vowed to find ways to cut through the payment hassles, enrollment and credentialing morass, vexing drug formularies, and other obstructions that dissuade Texas physicians from participating in Medicaid (TMA EVPGram, 2015). It’s Dr. Ratner’s hope that through the deregulation of Medicaid processes, education and empowerment of patients, positive recognition of physician contributions and the elimination of punitive treatment of physicians by MCOs, the TMA could make the Medicaid program more effective for patients and welcoming for physicians alike.

The group will reconvene in January 2016 at the TMA Winter Conference. A special meeting to address how MCOs and the rank and file physicians can improve processes and procedures will also occur in early 2016.

TRS Leaders at Interim Leadership Meeting in Austin

Bottom (L to R): Metter, Sepulveda, Childs, John, Lee, Seaberg, Wen
Middle (L to R): Trimmer, Roberts, Rice, Riesz, Lindstrom
Top (L to R): Schoppe, Kirk, Venkatesan (guest), Silva, Lowry
Upcoming Radiology Meetings of Interest

AIRP Thoracic & Cardiovascular Categorical Course
- February 15-18, 2016, Silver Spring, MD

New Frontiers in Pediatric Radiology: 4th Annual Comprehensive Course for Technologists and Radiologists
- February 26-27, 2016, Houston, TX

The Society of Abdominal Radiology (SAR): Annual Meeting & Educational Course
- March 13-18, 2016, Waikoloa, Hawaii

Society of Interventional Radiology: 41st Annual Scientific Meeting
- April 2-7, 2016, Vancouver, British Columbia, Canada

Texas Radiological Society 103rd Annual Scientific Meeting
- April 22-24, 2016, Westin Riverwalk, San Antonio, TX

ACR2016 Crossroads of Radiology
- May 14-19, 2016, Washington, D.C.

AAPM Annual Meeting
- July 31-August 4, 2016, Washington, D.C.

Enhancing Value, Improving Outcomes
- September 25-28, 2016, Boston, MA

Winner of

OVERALL EXCELLENCE