

The Society for Cardiovascular Angiography and Interventions

SCAI President's Page

The Benefits of SCAI Membership: A Little Goes a Long Way

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In the early 1990s, I joined SCAI, never expecting that I would someday be the Society's President. I am very proud to be serving SCAI and you, its members, particularly at this time of tremendous growth in both our profession and our Society. SCAI now numbers over 3,400 members, and I have every reason to expect that this growth will continue unabated. Our expanding ranks, combined with the Society's proactive and successful efforts in advocacy, development of guidelines and standards, and education, have made SCAI the voice of interventional cardiology.

The responsibility that comes with representing you, your patients, and our profession as a whole is something that the Society's Trustees, Committee Chairs, staff, and I all take very seriously. To that end, as I reported in last month's installment of the President's Page, the Board of Trustees recently approved unanimously a comprehensive Strategic Plan that will keep SCAI moving forward for the next three to five years,

and beyond.(1) The Strategic Plan was developed through a very broad-based, participatory process involving dozens of SCAI members from the spectrum of our community. The executive summary of the strategic plan can be found on the SCAI website at *www. scai.org*.

The strategic vision includes plans to expand and enhance SCAI's activities in all areas relevant to the Society's mission. The goals outlined in the Strategic Plan are our blueprint for carefully charting the future of our profession and for ethically and responsibly representing the best interests of our patients in all

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spheres. As you know, such responsibility requires investing in the future so that SCAI, as your professional medical society, can help to control and guide its own evolution.

After thorough analysis and deliberation, the Board of Trustees determined that, in order to successfully move forward with the Strategic Plan and to prepare for challenges ahead, it is necessary either to implement a dues increase or to reduce vital Society functions. To ensure that your needs and interests continue to be met, the Board recently unanimously approved a \$100 dues increase (U.S. Fellows and Members) so as to enable fulfillment of our current and planned activities.

I am, of course, honored to be a part of SCAI for many reasons, but I am particularly proud of the Society's inclusive approach to membership and priority setting. I believe that few professional medical societies are as "transparent" as SCAI. Nor are many as independent. SCAI's sound fiscal foundation enables it to serve you without regulation or imposition from outside bodies. You can count on your Society to speak up, talk straight, and tell it like it is. In that spirit, I want to share with you just what SCAI intends to do with your extra dues dollars. I feel confident you will find it worth the investment.

Your Dues Dollar at Work

First, you'll continue receiving and having access to all the valuable, tangible benefits of membership that you tell us you appreciate: your subscription to this *Journal*, packed with the latest research and case studies pertinent to practice; bimonthly updates on the Society's activities in *SCAI News & Highlights*; and extensive education and updates on *scai.org*, including the membership directory, downloadable guidelines and slides, and your portal to *CCI Online*.

Advocacy. As I mentioned above, SCAI has become *the* voice of interventional cardiology in the advocacy arena. While we often partner with other organizations (such as the ACC), SCAI is the only professional society that works solely and tirelessly for **you**.

This is tremendously important in our advocacy efforts, as evidenced by some recent successes in an increasingly difficult environment. Last year, we welcomed on to SCAI's talented staff an experienced, full-time advocacy and guidelines expert, who has worked relentlessly on our behalf and that of our patients to make sure that your voice is listened to by government and private payers. For example, SCAI has been working to convince Congress to fix the flawed system used to calculate physician reimbursement for treating Medicare patients. SCAI's advocacy

efforts persuaded the Centers for Medicare and Medicaid Services (CMS) to recognize that higher insurance costs are associated with the complex interventional procedures we offer our patients. Our efforts yielded a more promising outlook than other medical societies expected.

Your dues dollars have been hard at work in that effort, and they resulted in good progress. However, the challenges ahead promise to be even more intense — Congress still must be convinced to take legislative action to repeal across-the-board cuts for Medicare fees. We continue to work with medical societies in other disciplines to try to prevent the planned cutback in Medicare reimbursement.

Another high-priority item on our advocacy agenda is to protect the role of interventional cardiologists in cardiovascular imaging. The radiological community has launched a major campaign to drastically limit most medical specialists' access to advanced imaging modalities, such as 64-slice computed tomography. SCAI is a founding member of a large, multispecialty coalition countering this effort by the radiological community, and it is making good headway. But there is much work ahead, and focused efforts require increased vigilance.

Guidelines and Quality. Midway through my term as President, I have received a steady stream of positive feedback about the leadership role that SCAI has taken in developing and delivering best-practice information for the interventional cardiologist. Take, for example, SCAI's role in the updated SCAI/ACC/AHA Practice Guidelines on Percutaneous Coronary Intervention: SCAI was ably represented by four members on the writing committee, and the final document is a thorough compilation of recommendations regarding the latest advances in techniques, devices, and medications for treating our patients.

I must also point to SCAI's role as a leader in the medical community with regard to cutting-edge carotid artery stenting procedures. SCAI took up the reins in a major and ongoing effort to make sure this challenging procedure is implemented with appropriate care. First, your Society led the effort to develop a multispecialty clinical competence statement on carotid stenting. Then, SCAI built a high-quality educational system for helping physicians to achieve competency. The idea here was that it isn't enough to describe what competency is; we also have to give physicians the tools and opportunities to achieve competency. I want to personally assure you that your Society will continue this kind of forward-thinking service for you.

Education. With our new model for training in carotid stenting, you get a glimpse at your Society's penchant for innovation and creativity. With new pro-

grams like our Cardiac CT course, with the always-improving "Best of the Best" programming you'll find at the Scientific Sessions in Chicago, and with the host of new jointly sponsored and cosponsored programs, you get a view of the breadth and substance your Society plans to deliver. High-quality, timely education has been your Society's core mission since the founding days of Drs. Mason Sones and Mel Judkins. Your dues helps SCAI to continue delivering unbiased education.

As I close, I want to assure you that the Board of Trustees and I considered the decision to implement a dues increase very seriously. We would not have taken this step without absolute confidence that doing so will enable us to serve you and your patients even better in the years ahead. I trust that you, too, will see that it represents an excellent value.

If you have any questions or feedback on this or other topics related to your membership, please contact me at *president@scai.org*.

REFERENCE

 Uretsky, B. President's page—Moving forward: results of the strategic planning session. Catheter Cardiovasc Interv 2006:67: 167–169.