The American Association of Neurological Surgeons -AANS and the Congress of Neurological Surgeons -CNS are extremely concerned about the development of new documentation guidelines for evaluation and management services.

Contact(s):
Katie Orrico JD

September 15, 1998
Samuel A. Wells, Jr., MD
Director
American College of Surgeons
633 N. Saint Claire Street
Chicago, IL 60611

Dear Dr. Wells,
The American Association of Neurological Surgeons (AANS) and the College of Neurological Surgeons (CNS) are extremely concerned about the development of new documentation guidelines for evaluation and management services. Enclosed for your information and review is a letter we recently sent to HCFA and the AMA CPT Editorial Panel outlining our position and recommendations on this issue. The AANS and CNS encourage the College to take a strong leadership position on this issue and to that end urge you to consider adopting our recommendations.

The highlights of the AANS and CNS position are as follows:

1. We support the AMA policy, which rejects "any documentation system that requires quantitative formulas or assigns numeric values to elements in the medical record."
2. We support the AMA fraud and abuse policy, which, among other things, recommends that HCFA (a) discontinue random prepayment audits of E&M services, (b) use focused medical review of outliers, and (c) impose no financial or legal penalties for one level of disagreement in E&M code assignment.
3. The criteria for selecting an E&M service should be changed so that medical decision making is the primary criterion; history and examination would then be secondary criteria.
4. If HCFA proceeds with developing a quantitative system, it should minimize the number of "bullets" required to document each level of E&M service.
5. Physicians should be given credit for the extra time spent in counseling and coordinating care, and a time-based modifier should be developed to allow upcoding to the next level of service when a physician spends a great deal of time on these activities.

We have also made extensive modifications to the musculoskeletal and neurological exam elements contained in the "New Framework" document that was released in June.

In addition to the College, we have shared our letter with the other surgical specialties for their review and consideration. We understand from Henry Desmarais, that you will be convening a meeting of the surgical specialties in November. Perhaps you could add this issue to your agenda.

In the meantime, if you have any questions, please feel free to contact us.

Thank you for considering our request. Russell Travis, MD
President: American Association of Neurological Surgeons
William A. Friedman, MD
President: Congress of Neurological Surgeons
cc: Members, ACS Advisory Council for Neurosurgery
Henry Desmarais, MD