

UPDATE

# neurosurgery

**FOR IMMEDIATE RELEASE**

September 7, 2018

**Contact:**

Katie Orrico  
(202) 446-2024

[korrico@neurosurgery.org](mailto:korrico@neurosurgery.org)

## **Neurosurgeons Ask Lawmakers to Cut Red Tape in the Medicare Program**

*Groups Seek Legislation to Consolidate Quality Reporting Programs*

Washington, DC—Today, the American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) joined 26 other national medical organizations in sending [a letter](#) to lawmakers on Capitol Hill seeking regulatory relief from a burdensome program that will require clinicians who order advanced diagnostic imaging to consult with appropriate use criteria (AUC) each time they order a test. The letter was sent to the leaders of the Senate Finance and House Ways and Means and Energy and Commerce Committees, and was signed by physician organizations representing primary, specialty and surgical care.

Required by the Patient Access to Medicare Act (PAMA) of 2014, the Medicare Appropriate Use Criteria Program for advanced diagnostic imaging is a complex and duplicative reporting program that is scheduled to take effect in 2020. Because AUC consultation is inherent within the Merit-Based Incentive Payment System (MIPS) and alternative payment models (APMs) — both of which hold clinicians accountable for resource use — the letter asks lawmakers to modify PAMA in such a way that health care professionals who meet the requirements of the Medicare Quality Payment Program (QPP) will be deemed compliant with the AUC Program.

“Imaging is an integral part of neurosurgical practice, and our national organizations support the development of evidence-based appropriate use criteria to enhance value-based care. However, the burdens of this new duplicative and costly reporting program will be of little value to Medicare and will most certainly lead to unnecessary confusion and delays in care” said **Ann R. Stroink**, MD, FAANS, a practicing neurosurgeon from Bloomington, Illinois, and chair of the AANS/CNS Washington Committee.

The Centers for Medicare & Medicaid Services (CMS) has called the program "massive," and there have been numerous delays and challenges in implementing the program. Additionally, according to one recent study, it is estimated to cost \$75,000 or more for a practice to implement the tools necessary for compliance. Finally, the following aspects of the program underscore its breadth, cost and burden:

- Every clinician who orders an advanced diagnostic imaging test will be required to consult AUC using a clinical decision support mechanism (CDSM) that has been approved by CMS.
- Every health care professional who furnishes an advanced diagnostic imaging test will be required to report that the ordering clinician consulted AUC, and the program sets up a complex communication exchange system between the ordering clinician and the furnishing professional.
- The CDSM tools are not all embedded in electronic health record (EHR) systems, thereby requiring clinicians to use an additional software program outside of their regular EHR.

Dr. Stroink concluded, “Rather than perpetuating these two separate programs, the AUC imaging program should be consolidated into Medicare’s quality payment program so physicians participating in QPP will be deemed compliant with the AUC requirements. That would be a win-win-win solution for patients, physicians, and the Medicare program.”

###

*The American Association of Neurological Surgeons (AANS), founded in 1931, and the Congress of Neurological Surgeons (CNS), founded in 1951, are the two largest scientific and educational associations for neurosurgical professionals in the world. These groups represent over 8,000 neurosurgeons worldwide. Neurological surgery is the medical specialty concerned with the prevention, diagnosis, treatment and rehabilitation of disorders that affect the entire nervous system, including the spinal column, spinal cord, brain and peripheral nerves. For more information, please visit [www.aans.org](http://www.aans.org) or [www.cns.org](http://www.cns.org), read our blog [www.neurosurgeryblog.org](http://www.neurosurgeryblog.org), follow us on [Twitter](#) or connect with us on [Facebook](#).*