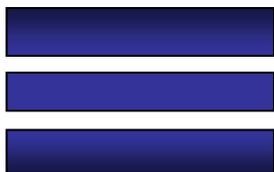


UPDATE



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Surgeons Reject Medicare Commission’s Proposal to “Rebalance” Physician Fees

Groups challenge assumptions cited for recommending a boost in pay for primary care physicians

Washington, DC—Joining nearly 20 other professional societies representing surgeons and anesthesiologists in the United States, the American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) sent a [letter](#) to the Medicare Payment Advisory Commission (MedPAC) opposing the commission’s [proposal](#) for “rebalancing” the Medicare physician fee schedule towards primary care services. MedPAC discussed these recommendations — which were initially unveiled in November 2017 — at its [public meeting](#) today.

MedPAC has recommended that Congress adopt one of two methods for boosting primary care fees:

- Increase payments for primary care and psychiatric services provided by *all* specialties in a budget neutral manner that lowers payments for surgical and other non-primary care services; or
- Increase payments for only *certain* specialties providing primary care and psychiatric services in a budget neutral way that results in lower fees for surgical and other services.

In the letter, the groups pointed out that many of the underlying assumptions driving this proposal are incorrect. Specifically, the surgeons challenge MedPAC’s view that primary care payments should be increased to address income disparities between specialties and as a means of addressing physician workforce issues. The groups highlighted the following reasons for their opposition:

- **The Medicare physician fee schedule does not require rebalancing**, as payment rates are in fact updated frequently and primary care is not undervalued relative to other specialties. Multiple ongoing efforts currently exist to identify and correct potentially misvalued codes. Furthermore, over the past two decades, Medicare has boosted payments for primary care services by billions of dollars — largely through corresponding reductions in fees for surgical and other non-primary care services.
- **MedPAC overstates the income disparities between primary care and other specialties.** Income differentials between the specialties are likely explained by the total number of hours worked. For example, one study found that neurosurgeons work 270 more hours annually than family physicians.
- **Factors other than compensation drive medical specialty decision-making**, and specialty choice is a very personal and complex decision.
- **The nation is facing an overall physician workforce shortage, and MedPAC inappropriately assumes that there is an oversupply of non-primary care physicians.** In fact, while the Association of American Medical Colleges (AAMC) projects shortfalls in primary care between 7,300 and 43,100 physicians by the year 2030, the shortfall in non-primary care specialties (primarily surgery and selected other specialties) is even more acute, approximating between 33,500 and 61,800 physicians. Additionally, allied health professionals, such as nurse practitioners, are meeting the demand for primary care services.

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“Rather than peddling 1990 ideas, MedPAC should be identifying solutions befitting of a 21st-century health care delivery system. The old ‘rob Peter to pay Paul’ approach to reimburse primary care under Medicare devalues the role of surgeons, who take care of complex problems and treat some of the sickest patients,” said Ann R. Stroink, MD, FAANS, a neurosurgeon from Bloomington, Ill., and chair of the AANS/CNS Washington Committee.

Dr. Stroink added, “Rather than dividing Medicine, policymakers should be taking steps to address the physician workforce shortage by improving payments for all physicians to ensure timely access to care for Medicare beneficiaries.”

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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 or www.cns.org or www.neurosurgeryblog.org.