



Neurosurgeons Taking Action



Neurosurgeons Taking Action is an E-newsletter from the American Association of Neurological Surgeons (AANS). The purpose of this E-publication is to provide you with timely updates on socio-economic and political issues facing neurosurgeons. **Neurosurgeons Taking Action** is sent out as news and events warrant your attention so that our members can stay on top of the issues that affect them.

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■ 2013 Medicare Trustees Report Released

On May 31, 2013, the Board of Trustees for Medicare released its annual report. The report continues to paint a bleak picture for the program's future, although the trustees are projecting that the Medicare trust fund won't be exhausted until 2026, two years later than they projected last year. The trustees point out that Medicare cost projections are highly uncertain, especially when looking out more than several decades and because some provisions of current law that are designed to reduce expenditures may be difficult to sustain. The clearest example of this is the sustainable growth rate (SGR) formula, under which payments to physicians are set. If Congress passes legislation preventing the 24.4-percent Medicare physician pay cut scheduled to begin in 2014, Medicare's financial situation is even worse. The AANS and CNS continue to advocate for comprehensive reform to modernize the program and ensure its sustainability well into the future. To read the full report, [click here](#).

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■ Neurosurgery Submits Testimony for Congressional Hearing Examining SGR Reform

As previously reported, on May 28, 2013, the House Energy and Commerce Committee [unveiled](#) a [draft legislative proposal](#) for repealing Medicare's sustainable growth rate (SGR) formula. On June 5, 2013, the House Energy and Commerce Committee held a hearing on the draft SGR legislation, where leaders from both sides of the aisle agreed that they have consensus on the broad policy goals needed to ensure that reform happens this year. Organized neurosurgery joined the [Alliance of Specialty Medicine](#) in providing detailed [testimony](#) for the record. In our statement, we urged the committee to embrace the following principles for SGR reform:

- Repeal of the SGR should be followed by a minimum five-year period of stable Medicare physician payments;
- Any new payment system based on quality must rely on positive incentives rather than penalties, and physicians should not be evaluated based on flawed ranking systems or head-to-head comparisons;
- To adequately account for practice cost inflation, base payment rates should be updated per the Medicare Economic Index (MEI);
- If a new SGR quality payment program is established, the existing [Physician Quality Reporting System](#) (PQRS), [Electronic Health Record](#) (EHR) Program and [Value-Based Payment Modifier](#) (VBM) Program must be repealed;
- Physicians, rather than the government, should determine the most appropriate and clinically relevant quality improvement metrics;
- Legal protections should be provided to physicians who follow clinical practice guidelines and quality improvement program requirements;
- Repeal of the Independent Payment Advisory Board (IPAB); and
- Allow for voluntary private contracting between physicians and Medicare beneficiaries.

Following the hearing, Energy and Commerce Committee chair, Rep. Fred Upton (R-MI); and Rep. Dave Camp (R-MI), chair of the House Ways and Means Committee, stated that the two committees are working together to formulate a final legislative product, on which they hope to act before Congress adjourns for its August recess.

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■ States Make Progress on Medical Liability Reform

On June 5, 2013, Florida Gov. Rick Scott (R) [signed](#) medical liability reform legislation (SB 1792) into law. This action changes the state's medical practice environment by requiring fairness in the use of expert witnesses. The law builds upon other medical liability reforms by requiring an expert medical witness to be in the same specialty as the defendant physician, ensuring a physician's constitutional right to counsel and giving parties equal access to medical fact witnesses.

Passage of this law comes on the heels of action taken in the neighboring state of Georgia in May, where Gov. Nathan Deal (R) signed into law HB 499, the [Provider Shield Act](#). This new law makes it clear that payor guidelines and criteria under federal law (e.g., healthcare quality measures and payment adjustments) shall not establish legal basis for negligence or standard of care for medical malpractice.

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Grassroots Action Alert

- **Contact Congress on Issues of Importance to Neurosurgery**

Now is the perfect time to contact your elected officials on issues of importance to neurosurgery. Whether the topic is medical liability reform, repeal of the Independent Payment Advisory Board, Medicare reimbursement or graduate medical education funding, yours is a valued voice in the halls of Congress. Please take a few moments to visit the [AANS/CNS Legislative Action Center](#) and send an email to Congress on these or other important issues.

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NeurosurgeryPAC

- **Contribute to NeurosurgeryPAC Today**

NeurosurgeryPAC's fundraising continues with donations from 199 neurosurgeons so far this year! As of June 20, 2013, NeurosurgeryPAC has raised \$152,696 in personal funds and \$19,150 in corporate donations, for a total of \$171,846. Thanks to all our contributors! We still have a long way to go to reach our \$500,000 fundraising goal and we need your help, so please donate today! As always, you can contribute using our online donation option by logging onto [MyAANS.org](#).

So far this year, NeurosurgeryPAC has donated a total of \$188,000 to 51 candidates and national political committees. Most recently, NeurosurgeryPAC participated in or co-hosted events for the following candidates: Rep. Charles Boustany, MD (R-LA); Sen. John Cornyn (R-TX); Sen. Mark Kirk (R-IL); Rep. Jim Matheson (D-UT); Rep. Tim Murphy (R-PA); Rep. Erik Paulsen (R-MN); Rep. David Scott (D-GA); Rep. Steve Stivers (R-OH); and Rep. Ed Whitfield (R-KY). Additionally, Washington Office staff has attended several "meet and greet" events to learn more about new members of Congress and candidates running for office, and their views on issues of importance to organized neurosurgery.

In other PAC news, on June 8-10, 2013, NeurosurgeryPAC participated in the 6th Annual PAC Board Forum in Louisville, Ky. Represented by NeurosurgeryPAC chair, Moustapha Abou-Samra, MD, FAANS; and PAC board member Carrie R. Muh, MD, the Forum brought together PAC board members and professional staff from the medical community to share ideas, discuss best practices and provide PAC board members with the tools and knowledge to become more effective fundraisers and foster relationships between our most

politically active physicians. This year's forum had the largest participation numbers to date, with more than 70 participants representing 23 physician organizations.

[Click here](#) for more information on the NeurosurgeryPAC, including the current complete list of donors, candidates receiving NeurosurgeryPAC support and to read more about your PAC in action. If you have questions about how you can get more involved, please contact Adrienne Roberts in the Washington Office at aroberts@neurosurgery.org.

Editor's Note: All contributions to NeurosurgeryPAC must be drawn on personal accounts. Contributions are not tax-deductible. AANS members who are citizens of the United States and pay dues or have voting privileges may contribute to NeurosurgeryPAC. All corporate contributions to NeurosurgeryPAC will be used for administrative expenses and other activities permissible under federal law. Federal law requires NeurosurgeryPAC to use its best efforts to collect and report the name, mailing address, occupation, and employer name of every individual whose contributions exceed \$200 in a calendar year.

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Coding and Reimbursement

■ **Blue Cross and Blue Shield of Minnesota to Cover Mechanical Embolectomy**

The [Joint AANS/CNS Cerebrovascular Section](#), Washington Committee, and the Coding and Reimbursement Committee have worked to educate payors across the country regarding coverage for mechanical thrombectomy. As reported last month, on March 6, 2013, Alexander A. Khalessi, MD, presented comments on behalf of the AANS and CNS before the California Technology Assessment Forum (CTAF) on the use of thrombectomy devices for emergent treatment of acute ischemic stroke. Last year, the AANS and CNS coordinated a [multispecialty letter](#) to the WellPoint's Office of Medical Policy, Technology, Assessment and Credentialing for their review on behalf of the BCBS Association plans, and arranged a follow-up conference call for the multispecialty groups and BCBS Association officials.

As a result of these ongoing efforts, Blue Cross and Blue Shield of Minnesota (BCBS MN) [reinstated](#) coverage for Mechanical Embolectomy for Treatment of Acute Stroke, following discussions at its May 22, 2013, Medical and Behavioral Health Policy Committee meeting. Effective July 8, 2013, BCBS MN no longer considers mechanical embolectomy investigative. As a result, these procedures will be eligible for reimbursement. Neurosurgeons experiencing claim denials for the procedure after July 8, 2013, should appeal and inform the AANS/CNS Washington Office. While the reversal by BCBS MN applies only to this payor, the AANS and CNS continue to work to encourage other payors to allow access to the procedure for appropriate patients.

If you have any questions regarding these developments, please contact Cathy Hill, AANS/CNS Senior Manager for Regulatory Affairs, at chill@neurosurgery.org.

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Quality Improvement

■ **NeuroPoint Alliance Officially Qualifies as a CMS PQRS Approved Vendor**

The National Neurosurgery Quality Outcomes Database (N²QOD), through the NeuroPoint Alliance (NPA), is now officially a [Center for Medicare and Medicaid](#)

[Services](#) (CMS) 2013 Physician Quality Reporting System (PQRS) approved registry vendor. N²QOD may now report quality data to CMS on behalf of participating physicians for purposes of avoiding the 2015 PQRS payment adjustment. To find out more about the N²QOD, visit the NPA website at www.NeuroPoint.org.

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■ **Organized Neurosurgery Submits Comments on Medicare's Proposed 2014 IPPS Rule**

The [Centers for Medicare and Medicaid Services](#) (CMS) recently released the [FY 2014 Hospital Inpatient Prospective System \(IPPS\) Proposed Rule](#). In addition to setting Medicare reimbursement rates for hospitals, the regulation includes additional proposed quality measures to strengthen the [Hospital Value-Based Purchasing](#) (VBP) Program and [Inpatient Quality Reporting Program](#) (IQRP). In response to the proposal, the AANS and CNS submitted [comments](#), which urged CMS to:

- Recognize the Responsive Neurostimulator (RNS) System meeting CMS' substantial clinical improvement criterion for add-on payments;
- Halt the expansion of the hospital readmission reduction program;
- Exclude patients with brain tumors or trauma from the postoperative pulmonary embolism/deep vein thrombosis quality measure requirements;
- Establish clear criteria for inpatient designation; and
- Reconsider its proposal for including several stroke readmission requirements in the IQRP.

For more information about these or other quality information topics, please contact Koryn Rubin, AANS/CNS Senior Manager of Quality Improvement, at krubin@neurosurgery.org.

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Of Note

■ **Neurosurgical Resident Maya Babu, MD, Elected to AMA Board of Trustees**

Congratulations to Maya Babu, MD, MBA, a fourth-year neurosurgical resident at the Mayo Clinic, who was elected to fill the resident-fellow slot on the [American Medical Association's](#) (AMA) Board of Trustees. Her campaign was supported by the AANS and CNS. Dr. Babu holds a Bachelor of Science in neuroscience and a Bachelor of Arts in psychology from the University of Minnesota-Twin Cities. She graduated from both Harvard Medical School and Harvard Business School. Dr. Babu has served in numerous capacities at the state, national and specialty levels, including her current roles as a member of the Minnesota Medical Association's Board of Trustees, a member of Minnesota MedPAC's Board of Directors and as the Chair of the National Resident Committee of the Association of Women Surgeons. She currently serves as the AANS/CNS [Council of State Neurosurgical Societies](#) Washington Committee fellow.

Dr. Babu joins neurosurgeon Monica C. Wehby, MD, FAANS, on the AMA Board, continuing the tradition of strong neurosurgical leadership at the AMA. They, along with neurosurgery's AMA delegation — Philip W. Tally, MD, FAANS; Ann R. Stroink, MD, FAANS; John K. Ratliff, MD, FAANS; Krystal L. Tomei, MD; and Zachary N. Litvack, MD — are working hard on your collective behalves on many important issues that affect neurosurgery and our patients.

Finally, we would like to recognize two neurosurgeons who have concluded

their service at the AMA. Peter W. Carmel, MD, FAANS, has represented neurosurgery at the AMA for more than 30 years, first as an alternate delegate from the CNS and ultimately as the president of the AMA. We also want to thank Mark J. Kubala, MD, FAANS, for his service as an AANS delegate. He too has devoted many years in service to neurosurgery on the advocacy and health policy fronts, starting back as a leader in the AANS/CNS Joint Socioeconomic Committee to his service as an AMA delegate. In recognition of his service to the profession, he received the AMA's Distinguished Service Award last November. Their dedication certainly demonstrated a remarkable commitment to helping improve the healthcare system for patients and physicians alike.

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Communications

■ **Wall Street Journal Publishes Neurosurgery's Letter to the Editor about Medicare Board**

On June 24, 2013, The Wall Street Journal published organized neurosurgery's [letter to the editor](#), which was submitted in response to an [article](#) by David Rivkin and Elizabeth Foley on the Independent Payment Advisory Board (IPAB). Signed by AANS president William T. Couldwell, MD, PhD, FAANS; and CNS president Ali R. Rezai, MD, FAANS, the letter agreed with the authors about the plethora of problems stemming from the IPAB — including the board's dubious constitutionality and the need to repeal it.

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■ **Recent Neurosurgery Blog Posts**

Every week, Neurosurgery Blog reports on hot topics and investigates how healthcare policy affects patients, physicians and medical practice. Listed below are some of the latest posts on the AANS Annual Scientific Meeting, medical liability, workforce shortage issues and healthcare reform in general.

- [The New BRAIN Initiative to Prevent and Treat Brain Attack \(aka Stroke\)](#)
- [House Committee Unveils Framework to Replace the SGR](#)
- [AANS Spotlight: Negotiating the Neurosurgical Learning Curve](#)

We invite you to visit the blog and subscribe to it, as well as connect with us on our various social media platforms, so that you can keep your pulse on the many health-policy activities happening in the nation's capital.

- [Neurosurgery Blog: More Than Just Brain Surgery](#)
- [Neurosurgery's Twitter Feed: @Neurosurgery](#)
- [Neurosurgery's Facebook Page](#)
- [Neurosurgery's LinkedIn Group](#)

If you are interested in these communications activities, please contact Alison Dye, AANS/CNS Senior Manager of Communications, at adye@neurosurgery.org.

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Questions or comments? Please contact Katie Orrico at 202-446-2024 or korrico@neurosurgery.org.

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