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Special Announcement

- **Pediatric Neurosurgeon Wins U.S. Senate Republican Primary in Oregon**

Pediatric neurosurgeon, Monica C. Wehby, MD, FAANS, won the Oregon Senate Republican primary race with 50 percent of the vote over five other candidates. Oregon State Rep. Jason Conger came in a distant second place with 26 percent. Dr. Wehby now faces the incumbent, U.S. Sen. Jeff Merkley, in the November general election. [Click here](#) for more information about the campaign.

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Legislative Affairs

- **Congress Presses CMS to Improve the Process of Valuing Physician Services**

Over the past several years, and to the frustration of many medical organizations, the [Centers for Medicare & Medicaid Services](#) (CMS) has increasingly rejected the American Medical Association ([AMA](#))/[Specialty Society Relative Value Update Committee's](#) (RUC) recommendations for valuing medical services — including neurosurgical procedures. To increase pressure on the agency, working with the [Alliance of Specialty Medicine](#), the AANS and CNS helped generate letters from members of Congress to CMS expressing concern about the lack of fairness and transparency in the process for establishing values for services under the Medicare program. On April 8, 2014, the Democratic leadership of the House Ways and Means and the Energy and Commerce Committees sent a [letter](#) to CMS Administrator Marilyn Tavenner. In addition, on April 17, 2014, 50 members of Congress sent a similar [letter](#) spearheaded by Rep. **Bill Cassidy**, MD, (R-La.).

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- **Neurosurgery Participates in Capitol Hill Briefing on Physician Shortage**

On Tuesday, May 6, 2014, AANS president-elect, H. Hunt Batjer, MD, FAANS, participated in a Capitol Hill briefing on the topic of physician workforce and graduate medical education (GME). He joined Atul Grover, MD, PhD, chief public policy officer at the [Association of American Medical Colleges](#) (AAMC), and an internal medicine resident from NYU on this program. [Click here](#) for information about the briefing on the AAMC website. Here you can watch [Dr. Batjer's](#) presentation and [download his slides](#). Also available are links to GME legislation that is currently pending before Congress and other materials.

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■ House Passes Children's GME Bill

On April 1, 2014, the U.S. House of Representatives passed S. 1557, the [Children's Hospital GME Support Reauthorization Act of 2013](#), which reauthorizes funding for the [Children's Hospital Graduate Medical Education \(CHGME\)](#) program for five years. Introduced by Sens. Bob Casey (D-Pa.) and Johnny Isakson (R-Ga.), the bill reauthorizes the CHGME program, investing \$300 million annually over the next five years. The program, which operates at 55 hospitals nationwide, is administered by the [Health Resources and Services Administration](#) (HRSA). The legislation was signed by President Obama on April 7, 2014.

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■ Sen. Lisa Murkowski Introduces Access to Volunteers in Disaster Bill

Rapid medical response in a disaster can significantly reduce loss of life and improve outcomes for patients in desperate need of care. When a disaster strikes, however, the needs of victims often overwhelm services that are available locally. [The Volunteer Protection Act](#), which was enacted specifically to encourage assistance, failed to provide liability protections for health care providers who cross state lines to aid disaster victims. To this end, on April 1, 2014, Sen. Lisa Murkowski (R-Alaska) introduced S. 2196, the [Good Samaritan Health Professionals Act](#). This legislation would allow health care professionals to volunteer their services during nationally declared disasters without the threat of medical liability concerns. A companion bill, H.R. 1733, was introduced last year in the House by Reps. Marsha Blackburn (R-Tenn.) and Jim Matheson (D-Utah).

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■ President Obama Signs Pediatric Research Bill

On April 3, 2014, President Obama signed H.R. 1724, the [Gabriella Miller Kids First Research Act](#), into law. Introduced by Rep. Gregg Harper (R-Miss.), and passed by the House of Representatives last December and the Senate in March of this year, the law provides \$126 million to the [National Institutes of Health](#) to support research on pediatric diseases and disorders. It is named after a Virginia girl with an inoperable brain tumor. Lawmakers lauded the tenacity of Gabriella Miller, who had advocated for the funding before she died last year.

If you have questions about these or other legislative issues, please contact Katie Orrico, director of the AANS/CNS Washington Office at korrico@neurosurgery.org.

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NeurosurgeryPAC

■ NeurosurgeryPAC Fundraising Efforts Continue

As of May 20, 2014, NeurosurgeryPAC has raised \$144,275 this year from 180 neurosurgeons. As previously reported, we still have a long way to go to reach our annual goal of \$250,000. This number takes on great significance since the 2014 elections are less than six months away. NeurosurgeryPAC contributions are, as always, given to candidates and current members of Congress who

support neurosurgery's priority issues. NeurosurgeryPAC is in a unique position to play a significant role within the physician community in identifying and supporting these candidates, but we need your help! Please make your online contribution today by logging onto MyAANS.org.

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

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■ **NeurosurgeryPAC Supports Additional Candidates**

NeurosurgeryPAC has made contributions to the following candidates for the U.S. House: Lizbeth Benacquisto (R-Fla.); Rep. Renee Ellmers (R-N.C.); Rep. John Fleming, MD (R-La.); Patrick Hope (D-Va.); Bob Johnson, MD (R-Ga.); David Rouzer (R-N.C.); and Rep. Greg Walden (R-Ore.).

In addition, your political action committee has supported the following candidates for the U.S. Senate: Sen. Susan Collins (R-Maine); Terri Lynn Land (R-Mich.); and Thom Tillis (R-N.C.).

[Click here](#) for more information on NeurosurgeryPAC, including the current complete list of donors, candidates receiving NeurosurgeryPAC support, and how NeurosurgeryPAC-supported candidates stand on the issues, as well as to read more about your PAC in action.

If you have questions about NeurosurgeryPAC, please contact Adrienne Roberts, senior manager for legislative affairs in the AANS/CNS Washington Office at aroberts@neurosurgery.org.

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Coding and Reimbursement

■ **AANS and CNS Comment on Washington State Lumbar Fusion Coverage Policy Review**

On May 9, 2014, the AANS, CNS, and the [AANS/CNS Joint Section on Disorders of the Spine and Peripheral Nerves](#), sent a [letter](#) to the Washington State Health Care Authority (HCA) [Health Technology Assessment](#) (HTA) Program regarding its decision to review its current coverage policy for lumbar spinal fusion. The letter was in response to an April 4, 2014, announcement by the HCA that the agency would review the current policy established in 2008. Following a technical assessment, the coverage policy will be considered and voted upon by the Health Technology Clinical Committee at a 2015 date yet to be scheduled. In the letter, organized neurosurgery questions the contention that new evidence warrants a review of existing policy. It also urges the agency to include neurosurgeons in the upcoming technical assessment and highlights the progress of the [National Neurosurgery Quality and Outcomes Database](#) (N2QOD). The agency will soon release draft research questions with a 30-day comment period. The AANS and CNS will work with the [Washington State Association of Neurological Surgeons](#) to respond as the review process goes forward.

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■ **Neurosurgeon Appointed to CPT Editorial Panel**

The [American Medical Association](#) (AMA) Board of Trustees has appointed neurosurgeon, R. Patrick Jacob, MD, FAANS, to a four-year term on the CPT Editorial Panel. Dr. Jacob has served as the AANS advisor to [CPT](#) for 14 years. During this time, he has led many multi-specialty workgroups on special coding issues — including pain, cerebrovascular, stereotactic radiosurgery, evaluation and management, intraoperative monitoring, and literature evaluation — demonstrating his deep understanding of the diversity and complexity of neurosurgical coding. In addition, since its establishment in 2007, Dr. Jacob has served on the editorial board of the CPT Assistant. He has earned the respect of physician colleagues, staff and other CPT stakeholders for his knowledge of and dedication to clear and concise coding.

If you have any questions regarding these or other reimbursement issues, please contact Cathy Hill, AANS/CNS senior manager for regulatory affairs, at chill@neurosurgery.org.

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Quality Improvement

■ CMS Proposes Delay Stage 2 Meaningful Use and Allow Physicians to Use Older EHRs in Incentive Program

Given the significant delays in hospitals' and physicians' abilities to implement the most current, certified electronic health record technology (CEHRT), a requirement for participation in the [Medicare and Medicaid EHR Incentive Programs](#), the [Centers for Medicare and Medicaid Services](#) (CMS) and the [Office of the National Coordinator for Health Information Technology](#) (ONC) announced in a [proposed rule](#) last week that it would extend Stage 2 of "meaningful use," for one year, and allow Stage 3 to begin in 2017. The proposed rule also would allow providers to use 2011 Edition CEHRT or a combination of 2011 and 2014 Edition CEHRT for the EHR reporting period in 2014. The AANS and CNS will be submitting comments on these proposals.

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■ Special 2014 EHR Reporting Periods for Eligible Professionals

If you are an eligible professional (EP), make sure you are aware of the special reporting periods for submitting meaningful use measures in 2014. For Medicare and Medicaid EPs, you only need to demonstrate meaningful use for a three-month, or 90-day, reporting period, regardless if you are demonstrating Stage 1 or Stage 2 of meaningful use.

Choose your reporting period based on your program and participation year:

- Medicare beyond first year of meaningful use: Select a three-month reporting period fixed to the quarter of the calendar year.
- Medicare in first year of meaningful use: Select any 90-day reporting period. To avoid the 2015 payment adjustment, begin your reporting period by July 1, 2014, and attest by Oct. 1, 2014.
- Medicaid: Select any 90-day reporting period that falls within the 2014 calendar year.

For more information, make sure to visit the EHR Incentive Programs website for the latest news and updates on the [EHR Incentive Programs](#).

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■ Physician Groups Should Register Now to Avoid PQRS Penalty

Neurosurgeons who wish to participate in the 2014 [Physician Quality Reporting](#)

[System](#) (PQRS) program as a group practice can now register for the [group practice reporting option](#) (GPRO). Physicians who do not participate in PQRS this year will be hit with a 2-percent payment penalty in 2016, while group practices that satisfactorily report data on PQRS measures during the 2014 reporting period are eligible to earn a 0.5-percent incentive payment. When your group is ready to register, you will need to access the [PV-PQRS Registration System](#) using a valid IACS User ID and password to choose your group's reporting mechanism. The registration system will be open from April 1, 2014, to Sept. 30, 2014, for the 2014 PQRS program. Additional information about the 2014 GPRO registration is available on the CMS website by [clicking here](#).

If you have any questions regarding these or other quality-related issues, please contact Rachel Groman, vice president for clinical affairs and quality improvement at Hart Health Strategies, via email at rgroman@hhs.com.

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Drugs and Devices

■ **Sunshine Act: Phase 1 Registration Began June 1**

On June 1, 2014, the [Centers for Medicare & Medicaid Services](#) (CMS) opened a two-step registration process for physicians and teaching hospitals who received payments or other items of value from biopharmaceutical or medical technology companies. Physicians must [register](#) with both the [CMS Enterprise Portal](#) and the [Open Payments](#) database in order to review data that is reported about them before it is available to the public. If physicians believe that data is inaccurate, they will be able to work with companies to correct it. However, when the database goes live in September, any inaccurate data will still be published, with a note that it is under dispute. Due to delays from CMS, physicians will only have a 45-day window to register, review and correct data. It is imperative that neurosurgeons stay up-to-date so they are aware of registration timelines and be an active participant in this process. Additional information is available on the CMS website by clicking [here](#).

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■ **AANS and CNS Join Alliance in Responding to FDA Draft "Off-label" Guidance**

On May 2, 2014, the AANS and CNS joined the [Alliance of Specialty Medicine](#) in sending a [letter](#) — along with an [updated position statement](#) — to the [Food and Drug Administration](#) (FDA) regarding physician-directed applications, also known as "off-label" use for approved medical products. In the letter, the Alliance supports the ability of companies to distribute truthful information — in the form of journal articles, medical textbooks, etc. — of physician-directed applications. The letter was sent in response to a recently issued FDA revised draft of its [Guidance for Industry: Distributing Scientific and Medical Publications on Unapproved New Uses—Recommended Practices](#). The draft updates the 2009 FDA guidance on medical literature reprint practices in response to stakeholder questions about its application to scientific and medical reference texts and clinical practice guidelines (CPGs) that may include information on unapproved uses. The FDA states that if manufacturers distribute scientific or medical publications as recommended in this guidance, the FDA does not intend to use such distribution as evidence of the manufacturer's intent that the product be used for an unapproved new use. While the FDA guidance document

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Neurosurgery Participates in FDA Network of Experts Event

On May 14, 2014, neurosurgeon Charles A. Sansur, MD, MHSc, FAANS, and AANS/CNS Washington Office staff attended the first [Food and Drug Administration](#) (FDA) [Center for Devices and Radiological Health](#) (CDRH) Network of Experts Open House. The Network of Experts program is a voluntary arrangement between medical specialty societies and the CDRH to provide rapid access to clinical experts to help answer question for center staff in their device review process. The AANS and CNS have participated in the program since 2012, and have provided expertise on a number of neurosurgical devices. In addition to participating in the Network of Experts, organized neurosurgery is active with the FDA through the AANS/CNS Drugs and Devices Committee, which periodically meets with FDA staff, provides recommendations of neurosurgeons to serve on advisory committees, and develops written and oral public comments on device issues when appropriate. More information on the Network of Experts program is available by clicking [here](#).

If you have any questions regarding these or other drugs and devices issues, please contact Cathy Hill, AANS/CNS senior manager for regulatory affairs, at chill@neurosurgery.org.

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Of Note

- **White House Hosted Summit on Youth Sports Safety**

On May 29, 2014, President Obama hosted a [Healthy Kids & Safe Sports Concussion Summit](#) at the White House, bringing together young athletes, academics, parents and others to raise awareness of head injuries among young people who play sports. Obama's aides said the summit will bring new commitments from the public and private sectors to research sports-related concussions and to raise awareness on how to identify, treat and prevent them.

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Communications

- **Dr. Robert Harbaugh Pens Op-ed on the Sunshine Act**

As part of our ongoing participation in the [Partners for Healthy Dialogues](#) initiative, which highlights the benefits of industry and physician collaboration, [Modern Healthcare](#) published an editorial by AANS president, Robert E. Harbaugh, MD, FAANS. The article, "[Physician-industry teamwork advances care](#)" addresses the notion that collaboration between physicians and industry is essential to improve the diagnosis and treatment of neurosurgical patients.

In addition, Newsweek magazine published comments that Dr. Harbaugh submitted in response to a May 22, 2014, article, titled "[The Sunshine Act Will Publicize Big Pharma's Undue Influence on Doctors](#)." Expressing his disappointment with the lack of balance in this article, Dr. Harbaugh pointed out that no information about the many positive aspects of interaction between physicians and biopharmaceutical and medical technology companies was included. He noted that collaboration between industry and neurosurgeons has been responsible for most advances in neurosurgical care and that "we also need to talk about all the positive ways in which doctors and companies work together, or we will throw the baby out with the bathwater."

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■ Neurosurgery Submits Multiple Letters to the WSJ

In April, the AANS and CNS, along with other national neurosurgical groups, submitted a [Letter to the Editor](#) to The Wall Street Journal in response to an April 15, 2014, article by Joseph Walker, titled "[When Spine Implants Cause Paralysis, Who Is to Blame](#)." Additionally, in conjunction with the [Health Coalition on Liability and Access](#), neurosurgery submitted another [Letter to the Editor](#) to The Wall Street Journal in response to an April 16 editorial, titled "[California's Malpractice Ruse](#)." Although both letters were not published, organized neurosurgery will continue to monitor news coverage and submit letters to help promote the viewpoints of the AANS and CNS.

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■ Subscribe to Neurosurgery Blog Today!

The mission of Neurosurgery Blog is to investigate and report on how healthcare policy affects patients, physicians and medical practice, and to illustrate that the art and science of neurosurgery encompasses much more than brain surgery. Over the past few months, Neurosurgery Blog has ramped up its reporting efforts to include multiple guest blog posts from key thought leaders and members of the neurosurgical community. Listed below are some recent blog posts on topics including the Obama and Ryan budget proposals, medical technology, Independent Payment Advisory Board (IPAB), and healthcare reform in general.

- [Medical Technology Provides Life Changing Solutions for Stroke Patients](#)
- [The Face of Neurosurgery](#)
- [AANS Spotlight: Pediatric Neurosurgery's Ever-changing Challenges](#)
- [AANS and CNS Unveil 2014 Legislative Agenda](#)
- [Double D.O.A.: The Obama and Ryan Budget Proposals](#)

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

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

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