

UPDATE

# neurosurgery

**FOR IMMEDIATE RELEASE**

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## **Neurosurgeons Praise House Committee Efforts to Repeal Medicare’s Flawed Physician Payment System** *Draft Legislation Reflects Many of Neurosurgery’s Core Principles for SGR Reform*

Washington, DC – The American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) joined 11 other medical societies in [commending](#) the U.S. House Energy and Commerce Committee for its bipartisan efforts to repeal and replace Medicare’s flawed sustainable growth rate (SGR) payment formula. This [draft legislation](#) reflects many of neurosurgery’s core principles and takes the following important steps to transform the way Medicare pays physicians:

- Repeals the SGR and includes a 5-year period of stability in Medicare physician payments, with positive updates during the transition period and each year thereafter;
- Encourages physician-led quality improvement that allows the medical specialty societies to determine the most appropriate and clinically relevant quality improvement metrics and strategies for use in future quality initiatives;
- Adopts flexible criteria that allow physician participation and engagement in delivery and payment models that are meaningful to their practices and patient populations, including preserving a viable fee-for-service option and recognizing the value of clinical data registries for improving quality; and
- Establishes legal protections making it clear that the development, recognition, or implementation of any guideline, quality improvement program or other payment standard under Federal healthcare law does not establish a new standard of care in any medical malpractice claim.

“The time to fix the flawed SGR is long overdue and organized neurosurgery is very encouraged by the legislation set forth by the House Energy and Commerce Committee,” said Dr. John A. Wilson, a neurosurgeon from Winston-Salem, NC and chairman of the AANS/CNS Washington Committee.

Neurosurgery does have several outstanding concerns, but looks forward to working with the committee to address these as the legislative process continues:

- Payment updates should keep pace with medical practice cost inflation to allow physicians to support quality improvement infrastructure such as electronic health records (EHR) and clinical data registry participation;
- The new quality update incentive program should replace the current Physician Quality Reporting System (PQRS), EHR and Value-Based Payment Modifier (VBPM) programs and penalties;
- It is unnecessary and duplicative to include provisions related to misvalued codes, as the mechanisms in current law adequately address this issue; and
- Patients and physicians should be allowed to privately contract on case-by-case basis, with beneficiaries receiving the Medicare allowable fee.

Dr. Wilson concluded, “Replacing the Medicare physician payment formula with a stable mechanism for reimbursing doctors will create a delivery system which will promote high-quality, high-value, and better-coordinated care to our patients.”

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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](http://www.aans.org) or [www.cns.org](http://www.cns.org) or [www.neurosurgeryblog.org](http://www.neurosurgeryblog.org).*