

UPDATE

# neurosurgery

**FOR IMMEDIATE RELEASE**

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## **Neurosurgeons Declare Senator Reid's Health Reform Bill to be Extremely Off Target**

*The Nation's Brain and Spine Surgeons Also Voice Disappointment in the Process*

(Washington, DC) –The [American Association of Neurological Surgeons](#) (AANS) and [Congress of Neurological Surgeons](#) (CNS) announced their opposition to the “[Patient Protection and Affordable Care Act](#),” released this week by [Senate Majority Leader Harry Reid](#). Additionally, while Senator Reid pushes ahead to finalize sweeping healthcare legislation in order to extend coverage to the uninsured and control increasing healthcare costs, the AANS and CNS cannot ignore several key issues which are vital to any overhaul plan and are missing from this bill including: **proven medical liability reform** and protections to ensure **patient choice of physician**, including **the right of patients to privately contract with their physicians**.

“Despite some positive aspects of this bill, including the expansion of health insurance coverage, improvements in access to emergency neurosurgical care, and loan forgiveness for pediatric subspecialists, this bill remains seriously off target. It doesn't adequately fix what's broken in our current system,” states **Troy M. Tippett, MD**, President of the AANS. “Unfortunately, this weekend the Senate will vote to begin debate on this legislation, which is extremely harmful for patients and physicians, rather than going back to the drawing board and drafting a more narrowly targeted bill that will benefit all Americans.”

“We remain concerned that despite the state opt-out provision, the community health insurance option still suffers the same shortcomings as the public option passed by the House of Representatives and will ultimately limit patient choice and put the government between the doctor and the patient, interfering with patient care decisions.” **Gerald E. Rodts, MD**, President of the CNS adds. “While we support healthcare reform, this bill fails patients and doctors because it imposes new agencies and more bureaucracy and government than currently exists. The AANS and CNS firmly believe that dismantling our current structure or creating a huge government bureaucracy is not necessary to achieve meaningful healthcare reform.”

The AANS and CNS find the following provisions to be particularly alarming:

- Eventually, the **community health insurance option** will lead to a single-payer, government run healthcare system;
- The bill fails to recognize the looming **workforce shortages** in surgery by requiring that all unused medical residency training slots be allocated to primary care and by providing primary care physicians bonus payments that are financed on the backs of surgeons and other specialists;
- The bill is devoid of proven **medical liability reforms** and merely includes a “Sense of the Senate” encouraging states to develop and test alternatives to the current civil litigation system as a way of addressing the medical liability problem. The Congressional Budget Office (CBO) recently confirmed that a comprehensive set of tort reforms will reduce the nation's deficit by \$54 billion over 10 years, which would help finance expanded health coverage and contain costs.
- Largely unchecked by Congress or the courts, the Secretary of the Department of Health and Human Services would have unprecedented authority through, among other things, the new Center for Medicare & Medicaid Innovation and the new **Independent Medicare Advisory Board**, to make significant changes to the Medicare program, which permits the government to arbitrarily reduce reimbursement for valuable, life-saving specialty care for elderly patients, thereby threatening treatment options.

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- The bill inappropriately expands the government’s involvement in determining the **quality** of medical care. Doctors are mandated to participate in the flawed Physician Quality Reporting Initiative (PQRI) -- which does not effectively measure quality – or face penalties for non-participation.
- The temporary one-year SGR “patch” to replace the 21.2 percent payment cut in 2010 with a 0.5 percent payment increase does little to address the serious underlying problems with the current Medicare physician payment system and compounds the accumulated **SGR debt**, causing a payment cut of approximately 28 percent in 2011. The CBO has confirmed that a significant reduction in physicians’ Medicare reimbursement will reduce beneficiaries’ access to services.
- Patient-centered healthcare is threatened by provisions curtailing the development of **physician-owned specialty hospitals**.

Finally, AANS and CNS leaders are disappointed in the process leading to the development of this bill. “At the invitation of Senate leaders and throughout the past year, we, along with other medical professional organizations, have provided significant input to help shape the future face of healthcare in America, explains Dr. Tippett. “And while we’re thankful for this open dialogue during such a critical time, we are disappointed that virtually none of our recommended changes are reflected in this bill, calling into question the value of this process.”

For more information on the position of AANS and CNS on healthcare reform issues, visit:

[http://www.aans.org/legislative/aans/Neuro\\_HealthCareReform.asp](http://www.aans.org/legislative/aans/Neuro_HealthCareReform.asp) or

<http://www.cns.org/advocacy/wc/nsHealthcareReform.aspx>.

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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 approximately 7,600 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).*