

Changes in Organized Neurosurgery: An Evolving Social Role

Georgia Neurosurgical Society
Sea Island, Ga.
May 22-4, 2009

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AANS President – 2008-9

Traditional Medical Professional Association Purposes: 3 Levels

- I. 1) Scientific / Education forum
 - Meetings
 - Publications
- 2) Socialization with colleagues
- 3) Professional distinction & peer recognition
- II. 4) Standard-setting policies
 - Training
 - Practice
- 5) Ethical code
- III. 6) **Sociopolitical representation**

A History of Neurosurgical Societies: A Chronicle of Exclusions

- Society of Neurological Surgeons 1920
- Harvey Cushing Society 1931
- Academy of Neurological Surgery 1938
- Neurosurgical Society of America 1948
- Congress of Neurological Surgeons 1951

- American Association of Neurological Surgeons (Harvey Cushing Society) 1967

Carl Hauber, "The Evolution of Organized Neurological Surgery in the U.S.," Greenblatt, Samuel, *A History of Neurosurgery*, 1997, p. 529 – 542.

Geographic Societies

- Regional neurosurgical societies
 - Southern
 - New England
 - Interurban
 - Rocky Mountain
 - Western
- State societies / associations
 - Basis of CSNS delegate representation

Sub-Specialty Sections: Beyond the First Stage

- Joint Sections
 - Pediatrics (1972)
 - Cerebrovascular (1975)
 - Stereotactic & Functional (1975)
 - Spine (1979)
 - Tumor (1984)
 - Trauma (1985)
 - Pain (1988)
 - History (1989)

AANS Evolution

- Finding a unified voice for neurosurgery
 - Mayfield, Academy meeting, 1948
 - Hendrick Svien, HCS Secretary, 1962
 - **Mayfield proclamation 1965**
- AANS 1967 – searching for representation
 - Original representative Board: Academy, SNS, NSA, CNS, Canadian NS Society
 - 4 Quadrant Directors added 1977
 - 5 Society Directors eliminated & changed to 9 "at-large" Director 1980
 - 1984 – 2009: 5 at-large & 4 regional directors

Carl Hauber, "The Evolution of Organized Neurological Surgery in the U.S.," Greenblatt, Samuel, *A History of Neurosurgery*, 1997, p. 529 – 542.

AANS-CNS Relationship: Competition vs. Cooperation

- Joint Committees in the 1970's
 - Socioeconomic Committee (JSEC → JCSNS)
 - Education Committee
 - Drugs and Devices Committee
 - Washington Committee
- Joint Sections 1972 – 89
- Joint Officers 1976 – 2001
- Neurosurgery On-Call 1996
 - www.aans.org / www.cns.org 2000-1
- Meeting management separation 2000
 - Dependence – Independence - Interdependence

Buz Hoff's AANS 4-Legged Stool: Roles of the AANS - 1994

- Teaching
- Research
- Patient Care
- **Socioeconomics**

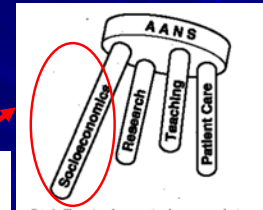
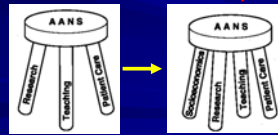


FIG. 3. Illustration demonstrating how overemphasis on socioeconomics can threaten the balance of the organization and perpetuate its dependency on a specific and professional group.

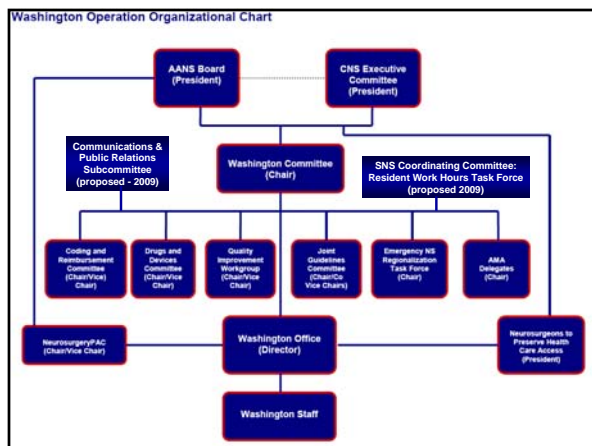
Hoff, Julian, "Toward Better Balance; The 1994 Presidential Address", Journal of Neurosurgery 81: 651-55, 1994

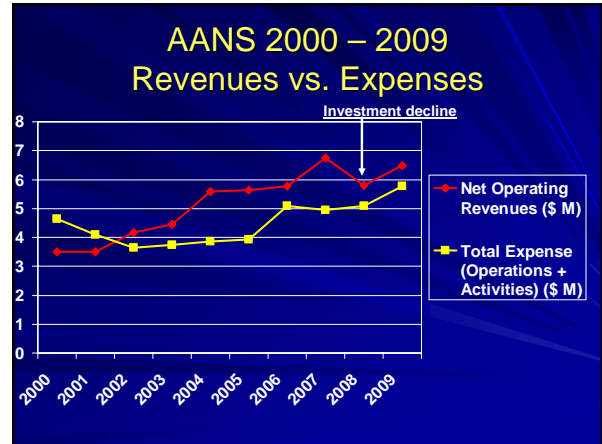
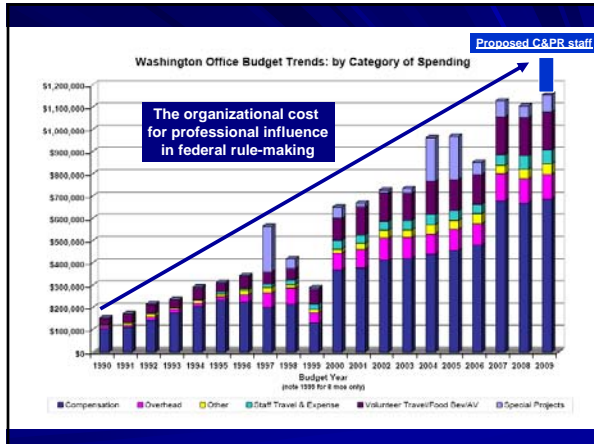
Washington Committee (1975)

- Part-time lobbyist 1975 (Chas. Plante) / Full-time office 1997 (Katie Orrico)
 - Coding & Reimbursement (CPT/RUC) 2000
 - NPHCA – DMLR 2003
 - Drugs & Devices Committee (FDA) 2003
 - AMA delegation (AANS/CNS) 2003
 - Joint Guidelines Committee 2005
 - Quality Improvement Workgroup 2005
 - Emergency Care Regionalization Task Force 2007
 - Communications & Public Relations Committee (proposed – 2009)

Washington Committee 17 Liaisons

- Joint Sections (6)
- SNS
- Young Neurosurgeons Committee
- PAC
- DMLR
- ACS
- AMA delegate
- NERVES
- Subcommittee chairs: CRC, D&D, QIW, JGC

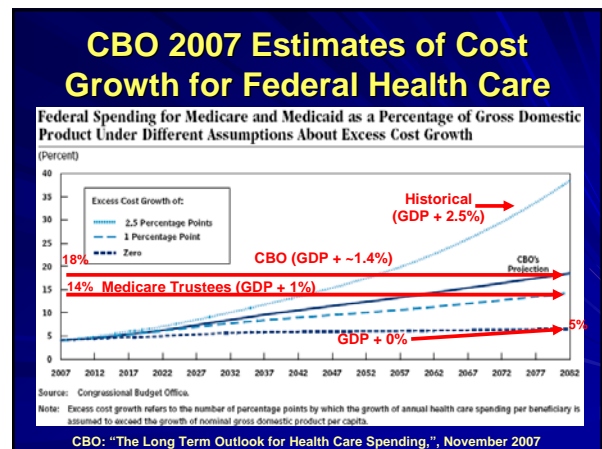
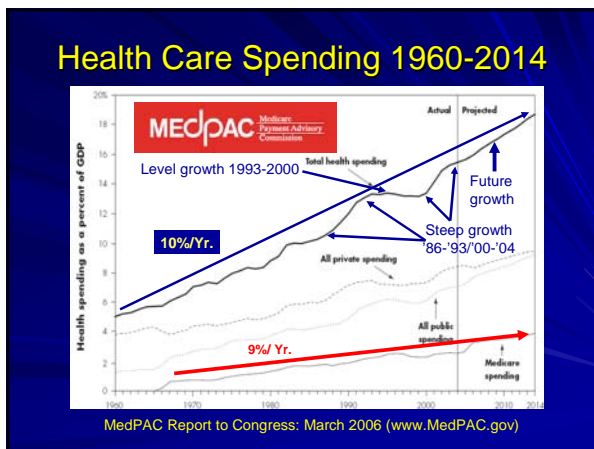


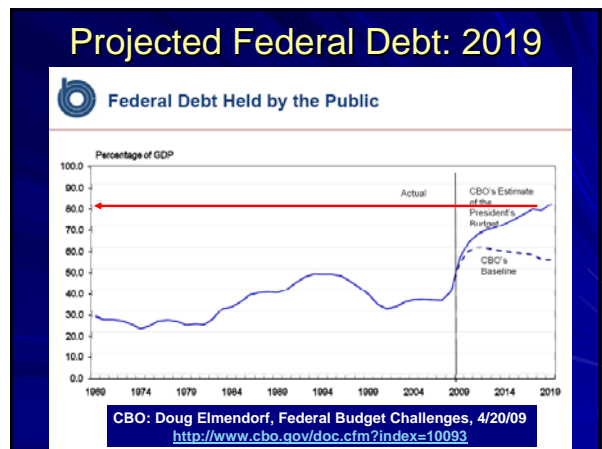
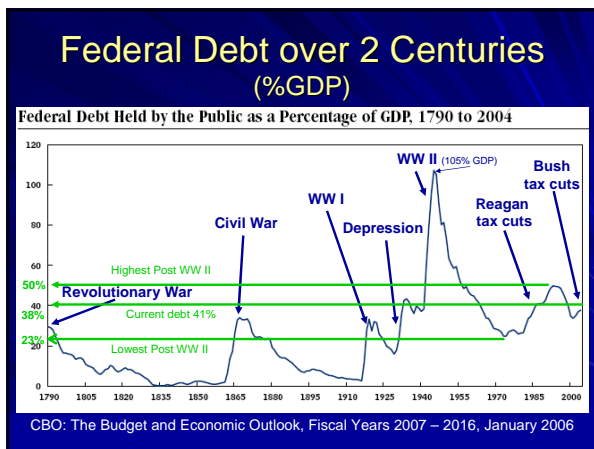
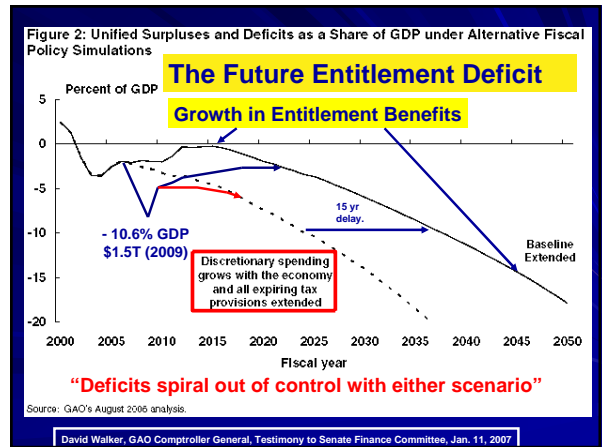
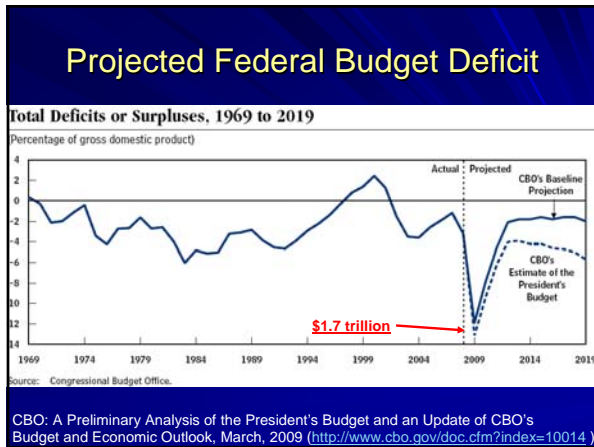
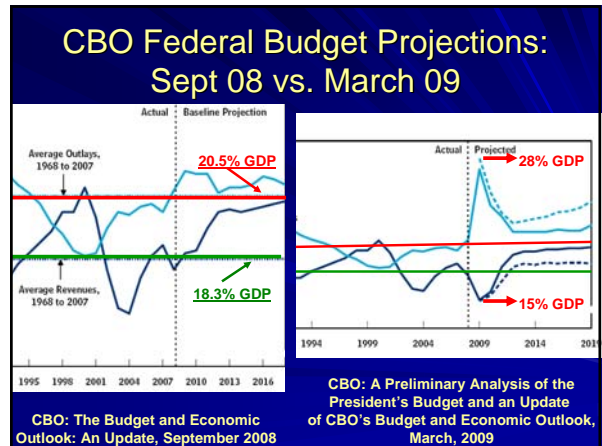
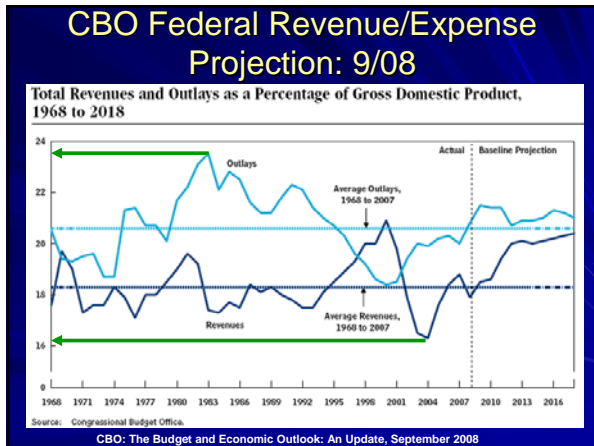


What's Driving Neurosurgery's Expanding Socioeconomic Action?

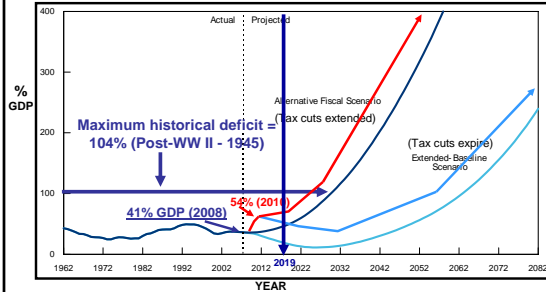
- **Primus movens: Federal health care policy & budget**
 - Medicare 1966; PSROs 1972
 - MFS/ RBRVS 1992; SGR 1997
 - NCDs (National Coverage Determinations)
 - Quality & Guideline (now CE) movements
- **State health care policy**
 - LCD (Local Coverage Determinations)
 - State coverage policy
 - Washington State Health Policy Board
 - Workers Compensation

Why the Expansion of Federal Health Care Policy?





Federal Debt Held by the Public as a Percentage of Gross Domestic Product Under CBO's Long-Term (75 yr.) Budget Scenarios



Peter Orszag, Congressional Budget Office, January 2008

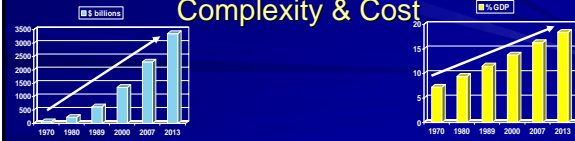
Neurosurgery & The Federal Policy & Budget

- Training – GME / IME funding
 - Residency Work Hours: ACGME / IOM
- Research – NIH funding
- Payment – Medicare Fee Schedule, budget-neutrality rule
- Technical innovation – Medicare Coverage Policy
- Education & PMA* funding - Grassley "Sunshine Act"

*Professional Medical Association

Professional Medical Organizations & Evolving Social Role

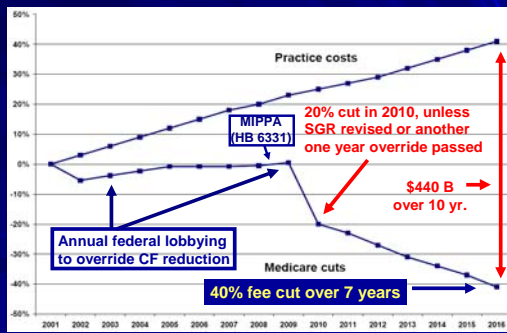
The Consequences of Complexity & Cost



Medicare Itemized Reimbursement: A Quasi-Public Negotiation

- **CPT** 1966
 - Service / procedure code assignment
 - Multispecialty Editorial Panel
- **RUC**: OBRA 1986, MFS 1992
 - CPT value assignment
 - Designated Neurosurgery seat
 - Primary care's specialty seat challenge
 - 2007 E&M budget-neutral increase (\$4 B)
 - CMS "overpriced" procedure search

Medicare's SGR Formula: The Fee Schedule Cost Lever



Medicare Payment Issues: AMA / ACS Meetings Oct. 2008

- SGR repeal
 - Multiple conversion factors
- No budget neutral funding shift to PCP
- Bundled payment / episode of care pilots
- Comparative effectiveness: clinical, not cost
- Gain-sharing
- Pay-for-Performance
- Primary care Medical Home – pilot projects

Proving Quality: A Neurosurgery Outcome Data Registry

- Neuropoint Alliance (NPA) – Nov. 2008
 - AANS – CNS joint venture
 - Outcome Science – data management vendor
 - ABNS – building from MOC data entry mode
- Commercial payer: BC/BS, Aetna
 - Phase 1: Pay for participation
 - Phase 2: Pay for Performance (QI)
- Federal payer: Medicare PQRI
- Device manufacturers: post-market outcome surveillance

Future Medical Innovation: Technology Coverage & Use

- Where science, public policy, & professional political action intersect
- Examples
 - Total disc arthroplasty (Artificial disc)
 - Medicare: May 2006 – noncoverage NCD
 - Washington State Health Authority – 2008
 - Wellpoint (Office of Medical Policy and Technology Assessment) – Nov 08
 - Cerebrovascular angioplasty & stenting coverage policy
 - Carotid / intracranial

Guideline Development: An Evidentiary Basis of Practice

- Joint AANS/CNS Guidelines Committee
- Commercial Guideline Sources
 - Cochrane Reviews
 - ACOEM (American College of Occupational and Environmental Medicine)
- AHRQ: Federal guideline repository
 - NGC (National Guideline Clearinghouse)
 - www.guideline.gov

Changes in Organized Neurosurgery:

Federal Public Policy Lobbying

Outcome Research

Guideline Development

Redefining & Renewing Professionalism