

Dateline|Washington

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College backs bill to stop pay cuts

On March 25, ACS Executive Director Thomas R. Russell, MD, FACS, wrote to Sen. Debbie Stabenow (D-MI) to offer the College's support for her introduction of S. 2785, the Save Medicare Act of 2008. This bill would stop the 10.6 percent cut in Medicare physician payments scheduled to take effect July 1 and would maintain current reimbursement levels through the end of 2008. Importantly, the legislation also would replace the scheduled 5.4 percent payment cut in 2009 with a 1.8 percent increase. To view Dr. Russell's letter, go to <http://www.facs.org/ahp/index.html>.

Medicare trustees issue bleak report

Medicare's Hospital Trust Fund will go bankrupt by 2019, as expenditures for Parts A and B continue to outstrip the overall economy, according to an annual report that the Medicare trustees released on March 25. The report presents a particularly bleak outlook for physician payment updates. At press time, Medicare reimbursement was scheduled to drop by 10.6 percent on July 1 and then by another 5.4 percent on January 1, 2009. Under current law, these reductions will be followed by annual cuts of approximately 5 percent through 2016. However, in 2013, the actuaries predict a positive update of 3.3 percent because of a one-year infusion from the physician assistance and quality initiative (PAQI) fund established last year. On the other hand, because the PAQI allows for only \$4.96 billion in additional spending, the estimated increase in program costs in 2013 will require a -13.1 percent offset in 2014. To view the report, go to <http://www.cms.hhs.gov/ReportsTrustFunds/downloads/tr2008.pdf>.

ACS supports performance charter

In early April, the College expressed support for the Consumer Purchaser Disclosure Project's efforts to develop a patient charter for physician performance measurement. The charter promotes fairness and transparency in health care quality measurement and reporting programs. It also calls for physicians to be involved in developing measures and reporting systems and states that individual physicians should have adequate notice and opportunity to correct inaccuracies in the data about their practices. To view the charter, go to <http://healthcaredisclosure.org/docs/files/PatientCharter040108.pdf>.

New York requires accreditation for OBS

The New York State Department of Health requires that physicians who perform office-based surgical (OBS) procedures receive accreditation from a nationally recognized organization by July 7, 2009. OBS procedures are defined as any surgical or other invasive procedures performed outside of a hospital, diagnostic and treatment center, or other facility in which moderate or deep sedation or general anesthesia is used. In addition, as of January 14, adverse events must be reported to the Department of Health Patient Safety Center. An adverse event is defined as follows: patient death within 30 days; unplanned transfer to a hospital; unscheduled hospital admission within 72 hours of the office-based surgery and for longer than 24 hours; or any other serious or life-threatening event. For further information, including a list of approved accrediting agencies, go to http://www.health.state.ny.us/professionals/office-based_surgery/.