



## **Overview: 2014 Federal Legislative Priorities**

The American Academy of Otolaryngology–Head and Neck Surgery (AAO-HNS) is committed to the enactment of legislation that will strengthen the delivery of, and access to, quality healthcare. To that end, the AAO-HNS urges Congress to take the following actions in 2014:

### ***Permanently Repeal the Sustainable Growth Rate (SGR) Formula***

The volatility and instability of the Medicare payment system is threatening beneficiaries' access to healthcare. Continued payment cuts, rising practice costs, and a lack of certainty going forward, make it difficult, if not impossible, for already financially-challenged physician practices to continue to treat Medicare patients. Over the past decade, the AAO-HNS and others in the physician community have repeatedly advocated for the reform and redesign of the unstable and unsustainable Medicare physician payment formula. However, Congress' failure to enact permanent reform has created an instability and uncertainty that undermines the ability of physicians to plan for the future, to provide for their employees, and to make investments to help improve the quality and efficiency of the care they provide. No true success in the healthcare reform and/or deficit reduction arenas can be achieved without the concurrent repeal of the SGR formula and development of a new Medicare physician payment model, like that included in H.R. 4015 and S. 2000. **Members of Congress are urged to encourage their leadership to allow consideration (and passage) of H.R. 4015/S. 2000 during the upcoming lame-duck session.**

### ***Protect Patient Safety within the Medicare Program***

The AAO-HNS strongly believes a physician-led hearing healthcare team, with coordination of services, is the best approach for providing the highest quality care to patients. In past years, some in the audiology community have pursued unlimited direct access to Medicare patients without a physician referral, and the AAO-HNS has repeatedly opposed such legislative efforts due to significant patient safety concerns. In addition, some members of the audiology community now seek to amend Title XVIII of the Social Security Act to achieve "limited license physician" status within the Medicare program. Hearing and balance disorders are medical conditions that require a full patient history and physical examination by a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO). While audiologists play a critical role in providing quality hearing healthcare, their desire to independently diagnose hearing disorders transcends their level of training and expertise. **To ensure patient safety is preserved, Members of Congress are urged to oppose H.R. 4035/S. 2046 which would provide audiologists with unlimited "direct access" to Medicare patients without a physician referral, as well as new legislation (H.R. 5304) that builds upon "direct access" by also seeking to include audiologists in Medicare's definition of "physician."**

### ***Repeal the Independent Payment Advisory Board (IPAB)***

The IPAB, an unaccountable body of individuals appointed by the President and charged with creating Medicare payment policy, usurps the rightful authority of our elected Congressional officials to create and shape Medicare policy. By limiting Congressional authority, the IPAB essentially eliminates the transparency of hearings, debate, and the meaningful opportunity of stakeholder input. In fact, fewer than half of the IPAB appointees can be healthcare providers, and none are permitted to be practicing physicians or be otherwise employed. **Members of Congress are encouraged to cosponsor H.R. 351/S. 351 and urge Congressional leaders to allow a "clean" vote on this repeal effort.**

### ***Support Clarity and Transparency in Healthcare Advertisements***

Currently, there is little “transparency” associated with the most fundamental and important component of healthcare delivery – the many health professionals who interact with patients every day. Recent studies confirm America’s patients prefer a physician-led approach to healthcare and are often confused about the level of training and education of their healthcare providers. Because of this uncertainty, patient autonomy and decision-making have been compromised. America’s patients deserve to be fully informed and able to easily identify in healthcare advertisements and interactions their providers’ credentials, licenses, and training when seeking treatment. **Members of Congress are urged to support H.R. 1427, the Truth in Healthcare Marketing Act of 2013.**

### ***Enact Comprehensive Medical Liability Reforms***

The nation’s current medical liability system places patients in jeopardy of losing their access to vital healthcare services. With affordable and adequate medical liability insurance becoming difficult to find, physicians are retiring early, limiting their practices, or moving to states with less costly premiums. This disturbing trend is leaving entire communities without access to critical healthcare services. As a specialty, in an effort to reduce and learn from instances of medical error, the AAO-HNS has committed substantial resources to and engaged our members in proactive quality improvement initiatives. However, further statutory changes are necessary to address flaws in our current tort system and enact proven reforms to reduce frivolous lawsuits. **Members of Congress are urged to explore innovative solutions to alleviate the burdens associated with the current medical liability system.**

### ***Protect Funding for Graduate Medical Education (GME)***

While the AAO-HNS recognizes the stark fiscal reality now present in the United States, it is critical that support and funding for the nation’s graduate medical education (GME) programs not be jeopardized as a means to achieve savings within the healthcare system. Reductions in GME funding will only cripple the nation’s already dwindling physician pipeline and leave Americans with an inadequate supply of physicians, including specialists. Tackling the deficit is important, but cutting physician training at a time when our nation faces a critical shortage of physicians would threaten the health of all Americans. **The AAO-HNS urges Members of Congress to refrain from reducing and/or redistributing critical GME program funding and support H.R. 1201 and S. 577.**

### ***Join the Congressional Hearing Health Caucus***

Hearing health is a growing concern in the United States, especially as the population of “Baby Boomers” continues to age and our nation’s servicemen and women return home from active tours of duty. As a result, it is critically important that robust programs and research are available to mitigate the challenges associated with prolonged and acute hearing loss. The Congressional Hearing Health Caucus (CHHC) is a bipartisan caucus of members from the House and Senate committed to supporting the needs of those who are deaf or hard of hearing. The CHHC strives to increase public and Congressional awareness of the issues of critical importance to those with hearing loss through periodic briefing and correspondence. **Members of Congress are urged to help promote effective hearing healthcare in this nation by joining the Congressional Hearing Health Caucus.**

*The AAO-HNS, with approximately 12,000 members nationwide, is the medical association of physicians dedicated to the care of patients with disorders of the ears, nose, throat (ENT), and related structures of the head and neck. We are commonly referred to as ENT physicians.*

***For more information on AAO-HNS federal legislative priorities, contact the Government Affairs team at [legfederal@entnet.org](mailto:legfederal@entnet.org).***