

American Society for Dermatologic Surgery Association Advocacy Agenda - 2009

Patient Safety

ASDSA supports public policy which ensures that medical procedures are performed by appropriately trained and supervised practitioners acting within their scope of practice.

In 2009, ASDSA will advocate proactively on behalf of appropriate patient safety policy for cosmetic medical procedures, particularly those which utilize energy-based devices capable of altering or damaging living tissue. Additionally, ASDSA will continue to assist state regulatory agencies with the creation of advertising guidelines which ensure that patients are provided with accurate and complete information regarding the qualifications of their providers.

Office-Based Surgery

ASDSA will continue to support fair public policy regarding office-based surgery which encourages quality assurance measures and mandatory reporting of adverse incidents. ASDSA will combat economic credentialing in all its forms and will actively oppose actions that result in restraint of trade for dermatologic surgeons.

Mohs Codes & Multiple Procedure Reduction Rule

Together with the Mohs Coalition, ASDSA will continue to address the issue of the loss of the Mohs Micrographic surgery codes exemption from the Multiple Procedure Reduction Rule of the Medicare Physician Payment Schedule.

Fair Physician Payment

ASDSA will work with other groups in aggressively lobbying to avert cuts in Medicare physician payments and "fix" the payment system for the long-term.

Cosmetic Medical Procedures Taxes

ASDSA, along with national and state strategically-aligned organizations, will oppose any efforts to impose a tax on cosmetic medical procedures.

American Society for Dermatologic Surgery Association Advocacy Agenda - Long Term

Patient Safety

ASDSA supports public policy which ensures that the definition of the practice of medicine includes cosmetic medical procedures which affect living tissue. As such, these procedures should be restricted to physicians acting within their scope of practice or licensed allied health professionals practicing under a physician's supervision and direction.

False and Misleading Advertising

ASDSA strongly recommends the implementation of simple, concise, and uncomplicated regulation and enforcement against fraudulent advertising. Policymakers need to protect consumers and patients by closing the loopholes in

the regulation of health care advertising which allows phony “medical-like” individuals to mislead consumers.

Definition of the Practice of Medicine

As a part of our patient safety efforts, ASDSA will continue to work with state medical boards to encourage them to adopt a definition of the practice of medicine which is not limited to the treatment of illness and disease, but also encompasses cosmetic medical procedures. ASDSA believes practice of medicine involves diagnosis, treatment, or correction of human conditions, ailments, diseases, injuries, or infirmities whether physical or mental, by any means, methods, devices, or instruments. The practice of medicine includes, but is not limited to performing any act or procedure that uses a biologic or synthetic material, chemical application, mechanical device, or displaced energy form of any kind if it alters or damages or is capable of altering or damaging living tissue.

Corporate Practice of Medicine

In the interest of patient care and safety, ASDSA supports the prohibition of the corporate practice of medicine. Laws prohibiting the corporate practice of medicine disallow a physician from acting as "medical director" of a spa, salon or other facility where cosmetic medical treatments are performed when the physician does not own the practice.

Fair and Responsible Complications Reporting

ASDSA supports the passage of state legislation and/or the implementation of state regulations calling for the mandatory reporting of adverse patient incidents. Such reporting should be based on the well-regarded Florida Board of Medicine reporting requirements.

ASDSA supports state legislation and/or state regulation to ensure that adequate privacy protections are adopted along with reporting regulations so that members and other office-based physicians are not made vulnerable to malpractice challenges unnecessarily.

Physician Credentialing

ASDSA supports the concept of physician credentialing where the process is reasonable, appropriate and fair. The process should ensure:

- A) Review of credentialing is performed by a committee of the physician's peers including members of his or her own medical specialty.
- B) Due process must be provided to ensure fairness in all considerations of credentialing and in any cases involving revocation of credentialing.
- C) Appropriate criteria used in the credentialing process may include such things as certification by a national medical specialty board recognized by the ABMS.

ASDSA opposes any physician credentialing regulations that are unfair, unreasonable or inappropriate, such as requirements that would place the applicant in the position of obtaining hospital privileges or transfer agreements in situations where they are unattainable.

Hospital Privileges; Hospital Transfer Agreements and Protocols; Alternative Credentialing

For medical offices where surgical services are provided at all levels of anesthesia services, the ASDSA supports mandatory emergency transfer protocols where these protocols do not mandate hospital transfer agreements. ASDSA supports fair and impartial mechanisms to allow dermatologic surgeons to procure credentialing at appropriate levels.

ASDSA opposes mandatory requirements for hospital staff privileges (at all levels), hospital admitting privileges, and hospital transfer agreements as requirements for physicians to perform office-based surgical procedures, as these constitute economic credentialing. ASDSA opposes actions that result in restraint of trade for dermatologic surgeons.

Medicare Physician Fee Schedule

In order to ensure access to care, the Centers for Medicare and Medicaid (CMS) must address the problems inherent to the deeply flawed Sustainable Growth Rate (SGR) formula to accurately reflect changes in medical practice costs. ASDSA will continue to urge CMS to work together with Congress and the physician community to address this issue, which becomes increasingly critical as more Americans reach retirement age and eligibility for Medicare.

Cosmetic Medical Procedures Taxes

ASDSA will continue to oppose the taxation of cosmetic medical procedures. For the past several years, state legislatures have proposed the taxation of elective cosmetic medical procedures as a solution to budget problems. Cosmetic medical procedures taxes are an unreliable and risky revenue source, place government employees in the precarious position of determining what procedures are strictly cosmetic versus medically-necessary, and have the ability to drive patients and physicians out of the taxing state.

Physician Gifts

The American Society for Dermatologic Surgery strongly supports policies which put patients first, promote the highest level of ethics for physicians and industry, and ensure medical and investigational decisions are not motivated or influenced by the promise of financial gain.

Public policy relating to physician relations with industry should clearly distinguish between gifts which are effectively inducements intended to influence treatment decisions in prescribing the use of specific drugs and medical devices versus justifiable compensation for clinical trials and research, legitimate ACCME-approved Continuing Medical Education (CME) and other irreproachable scientific and educational uses. The burden of reporting and compliance should rest on the donor pharmaceutical and medical device manufacturers, not physicians.

Approved by the ASDSA Board of Directors

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