



November 25, 2009

During the board meeting on November 21, the ASE Board of Directors approved an allocation of \$170,000 from reserve funds to assist in fighting two major threats to our specialty: the 2010 CMS Medicare Physician Fee Schedule (PFS) and pre-authorization by private payers. The Executive Committee will further discuss exactly which initiatives will be supported and at what level, but two projects currently being launched are: 1) the hiring of a legislative lobbyist to campaign against the PFS reimbursement cuts coming January 2010 and 2) engagement of a consultant and software development firm to create a point-of-order tool for private payers to use as an alternative to pre-authorization.

1) ASE and the American Society of Nuclear Cardiology have engaged a prestigious and influential lobbying firm with an excellent background in healthcare policy initiatives and strong connections to the Congressional leadership. This firm will further help us to strategize and combat the devastating final PFS rule. The American College of Cardiology and other subspecialty organizations have also been invited to participate in this effort. We realize that this fight will be an uphill battle, but we want to ensure that we do all we can to obtain the best positive outcome for our members and their patients.

2) Dr. Parker Ward of the University of Chicago has developed a prototype of a point-of-service tool that will be adapted for use at the point of order and then presented to payers as a possible alternative to the use of radiology benefit managers (RBMs) in ensuring echo appropriateness. Meanwhile, ASE's private payer team, a subset of the Advocacy Committee, continues to meet with payers in an effort to hold off imposition of onerous pre-authorization requirements and to invite them to help pilot this new alternative tool. It is hoped that, by offering a cost-effective alternative to RBMs, ASE can help make the requirements much less administratively complex and time consuming for practices while ensuring that the right test is performed on the right patient at the right time.

Many of you participated in a survey that ASE conducted about the impact of the cuts on your practices and your patients might look like. We are using the data we gathered in a number of ways, including using it in communications with legislators and CMS, sharing it with ACC and other subspecialty organizations, and sharing it with the media through an aggressive public relations campaign. A press release was sent to major media outlets on Tuesday, November 24; [you can read the text of that release here.](#)

ASE is pulling out all the stops to try to minimize financial and administrative burdens that would hurt your practice. Please consider joining the fight by:

1. [Contacting your Congressional Representatives](#) - feel free to send more than one letter or to follow up on previous letters you've sent.
2. Making a [voluntary contribution](#) to help us continue the fight for our profession.
3. Visiting the ASE Website weekly for [resources and talking points](#) that can be provided to CMS and your patients.