

Capitol Hill Report: Neurology on the Hill Recap

Capitol Hill Report presents regular updates on legislative and regulatory actions and how the Academy ensures that the voice of neurology is heard on Capitol Hill. It is emailed to US members twice monthly and is posted at [AAN.com/view/HillReport](https://www.aan.com/view/HillReport). Below are some recent highlights.

Neurology on the Hill Recap, by Joohee Jimenez-Shahed, MD, first time NOH attendee and member of the Advocacy Engagement Committee

Every year, I see the emails from the AAN about Neurology on the Hill (NOH) come and go, and have admired those individuals who have actually taken the time out of their busy schedules to advocate on behalf of our profession and our patients on Capitol Hill. But what are they doing over there? What is advocacy for neurology?

This year, I got to participate in NOH for the first time—and saw neurology advocacy in action, firsthand—a great experience!

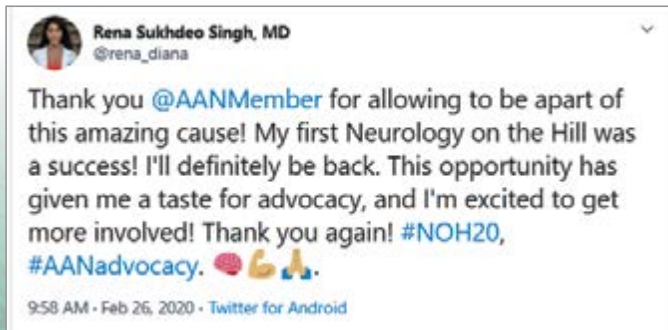
The reality is that we all fight advocacy battles on our home turf. It is a day-to-day necessity in order ensure that our patients get the medicines, tests, ancillary services, or even assistance that they need to live their lives to the best of their ability and preserve their quality of life. The act of asking someone else's permission to be able to treat our patients the way we have been trained to treat them is a necessary burden that neurologists bear—but do we really need to? Did you know that the average neurologist's office spends at least two days per week dealing with things like prior authorizations, the vast majority of which (approximately 90 percent) are approved anyway? In the meantime, our patients are subject to unnecessary treatment delays (on average, two to 14 days



Joohee Jimenez-Shahed, MD, (second from left) and the New York delegation.

but sometimes more) and our office staff is bogged down in redundant phone calls, faxes, and paperwork.

One of the AAN priorities at NOH was to ask House legislators to support or cosponsor the Improving Seniors' Timely Access to Care Act of 2019. This bill increases transparency and streamlines prior authorization (PA) in Medicare Advantage Plans by (amongst other things)



Sen. Chuck Grassley (R-IA), center, discussed health policy issues with David Moore, MD (left), and Stephen Rostad, MD (right).



(From left) Sen. Diane Feinstein (D-CA) posed with Nina Riggins, MD.



(From left) Sameh M. Rep. Matt Cartwright, Committee Chair Glenn

requiring an electronic PA, minimizing the use of PA for routinely approved services, and ensuring PA requests are reviewed by qualified medical personnel. Over 130 representatives have already signed on and AAN delegates encouraged senators to support similar legislation that removes regulatory barriers when it is raised in that chamber.

Another tremendous difficulty for many of our Medicare patients relates to the out-of-pocket cost threshold that they must meet before catastrophic coverage kicks back in—i.e., when the “donut hole” closes. This threshold has been slowly but steadily rising, held in check by the Affordable Care Act. Despite this, we have all had conversations with our patients regarding drug costs, which at times very prominently influences treatment decisions. Would you believe that in 2020, the threshold increased to a whopping \$6350? These exorbitant costs lead to poor medication adherence, medication rationing, and poor treatment compliance—with potentially devastating consequences. Alongside this, patients’ share of these costs is rising, with some drug costs increasing annually despite no changes to the product or presence of actual market competition! The AAN therefore seeks to lower out-of-pocket medication costs by asking Congress to include a sweeping Part D program redesign in any final drug pricing package and to reduce the total out-of-pocket spending threshold to \$3,100 or lower.

Lastly, as in years past, the AAN asked Congressional members for continued support of research funding for neurologic diseases in four key areas: NIH funding, BRAIN Initiative funding,

and support for the Centers for Disease Control and Surveillance National Neurological Conditions Surveillance System and the Agency for Healthcare Research and Quality. I learned that the NIH supports nearly 476,000 jobs and more than \$81 billion in economic activity across the US, and that each \$1 the public spends on basic research (i.e., via the NIH) stimulates an \$8.38 increase in industry R&D spending. Beyond this economic stimulus to our communities, maintaining the momentum of funding of these research initiatives is essential to promote neuroscience discoveries and cures for neurologic disease.

After an extensive day of well-coordinated training and practicing our “pitches,” 211 NOH delegates from 48 states met congressional staffers (and sometimes the senators and representatives themselves!) on day two to describe these legislative priorities. Through pointed vignettes, we made the case for legislative action that directly impacts our patients and practices—and that is advocacy in action.

So, the next time you think or read about AAN advocacy, NOH, or the Capitol Hill Report, think about what YOU can do to support these important activities and priorities:

- Email your representative asking them to support the AAN’s research funding priorities at AAN.quorum.us/campaign/24976/.
- Contact the AAN if interested in participating in Neurology off the Hill at advocacy@aan.com.
- Follow #AANadvocacy on social media. ■



Susan Anzalone, MD; Wesley Reynolds, MD, FAAN; and Jeanne Feuerstein, MD; met with a staff member for Colorado Sen. Michael Bennet (D).



Anthony Davis, MD, FAAN, with Jonathan Santoro, MD (D-PA) and BrainPAC Executive Director R. Finney, MD, FAAN.



(From left) Anthony Davis, MD, spoke with Sen. John Boozman (R-AR).



Rep. Doris Matsui (D-CA) shared time with constituents Jonathan Santoro, MD, (left) and AAN Board Member Charles C. Flippin II, MD, FAAN (right).