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Advocacy Monthly



STS Sets 2022 Advocacy Strategy

The Society has released its advocacy priorities for 2022. This plan will provide a framework for discussions with legislators and other stakeholders, as well as help guide the activities of the Workforce on Health Policy, Reform, and Advocacy and the STS Government Relations team. In selecting the advocacy initiatives, the Society considered the current political environment, STS mission, and relevance to cardiothoracic surgeons and their patients.

The 2022 priorities include:

- Advance patient access to cardiothoracic surgical care
 - Seek long-term solution to Medicare physician payment system and mitigate cuts to Medicare reimbursement
 - Address the cardiothoracic surgery workforce shortage
- Ensure Medicare payment models adequately meet the needs of cardiothoracic surgery
- Promote racial and socioeconomic equity in health care
- Obtain Medicare claims data to use with the STS National Database and preserve Coverage with Evidence Development as a Medicare coverage option
- Preserve health care research funding

Do you want to get involved in advocacy and health policy?

[Become an STS Key Contact](#) and have a direct impact on timely legislative issues that affect the specialty. The program helps members stay informed, build relationships, and engage with lawmakers. For more information, contact advocacy@sts.org.

CMS Considers Comprehensive Changes to Organ Donation, STS Responds

As part of its continuing efforts to improve access to the organ donation and transplantation system, the Centers for Medicare & Medicaid Services (CMS) issued a comprehensive Request for Information seeking public comments on potential changes to the requirements that transplant programs, organ procurement organizations, and end-stage renal disease facilities must meet to participate in Medicare and Medicaid programs. The Society [responded with comments](#) about supporting federal programs to maximize the effectiveness of organ transplantation, improving access to transplantation, expanding the donor pool, and implementing measures to identify, characterize, and mitigate disparities in the delivery of health care. Comments currently are under consideration by CMS.

Health Equity in Cardiothoracic Surgery Is Focus of New Policy Paper

With a deep commitment to the elimination of bias and disparities in health care and cardiothoracic surgery, the Society recently approved a [paper on health equity](#) that will be included in the [STS Health Policy Compendium](#). The thorough policy paper—which will help guide certain STS advocacy efforts—details health equity-related initiatives, disparities in cardiothoracic disease and care, and the Society’s positions on key policies aimed to reduce health inequities across the continuum of care.

Congress Is Reminded of Work to Be Done with Medicare Reimbursement

The Surgical Coalition, which includes the Society, sent a [letter to Congressional leaders](#), urging them to work together in 2022 to find solutions that “address the long-term stability of the Medicare physician payment system and reform policies to help MACRA [the Medicare Access and CHIP Reauthorization Act of 2015] reach its intended goals of a sustainable value-based delivery system.” The group also encouraged the policymakers to hold hearings to review the “broken payment system” and begin considering long-term solutions.

New Video Examines How Cardiothoracic Surgeons Are Reimbursed

In the [latest video](#) from the 8 in 8 series, Dr. Megan Loo introduces the basics of surgeon salary and compensation, while also detailing two types of reimbursement models: one for an academic practice and another for a private practice. In addition, important questions about reimbursement that cardiothoracic surgeons should consider are shared. [This series](#) offers quick access to important topics in the specialty. Each informative video is narrated by experts and covers one topic using eight slides in 8 minutes. New videos are added regularly.

What is a salary? What is compensation?



AORTIC VALVE PROCEDURES — (CONTINUED)		2018	
CPT Code	Code Description	Facility RVUs ¹	Physician Facility Fee Schedule ²
33390	Valvuloplasty, aortic valve, open with cardiopulmonary bypass; simple	54.95	\$1,978
33391	Valvuloplasty, aortic valve, open with cardiopulmonary bypass; complex	65.19	\$2,347
33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	65.62	\$2,362
33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)	83.04	\$2,989
33410	Replacement, aortic valve, with cardiopulmonary bypass; with stentless tissue valve	73.60	\$2,650



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