NeurosurgeryPAC 2023 Annual Report



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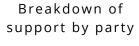
inancial statements

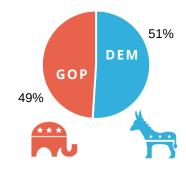
Money raised in 2023	\$238,527
Money disbursed in 2023	\$229 500

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Breakdown of support	b y	party
73 CANDIDATES FOR OFFICE		

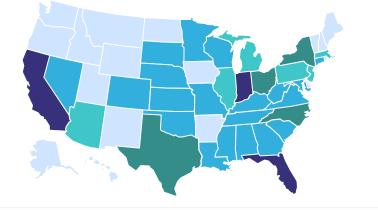
Democrat	51%
Republican	49%

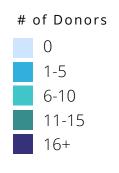






Number of Participants by State

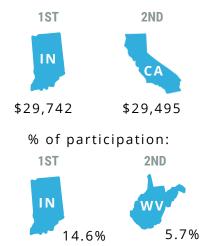






Winners of Leibrock State Leadership Award

Top states by: \$ raised in contributions:



TOP STATES BY MONEY RAISED IN CONTRIBUTIONS:

Winner	INDIANA	with	\$29,742
Runner Up	CALIFORNIA	with	\$29,495

TOP STATES BY PERCENTAGE OF PARTICIPATION:

Winner	INDIANA	with	14.6%
Runner Up	WEST VIRGINIA	with	5.7%

2023 Legislative & Regulatory Priorities and Accomplishments

The American Association of Neurological Surgeons and the Congress of Neurological Surgeons made significant strides in accomplishing their 2023 legislative and regulatory agenda, thus ensuring that neurosurgical patients continue to have timely access to quality care.

PROTECT PATIENTS' TIMELY ACCESS TO CARE	In 2022, the House of Representatives unanimously passed bipartisan legislation to streamline prior authorization in the Medicare Advantage program, the <i>Improving Seniors' Timely Access to Care Act</i> (S. 3018 / H.R. 3173). In 2023, the Centers for Medicare & Medicaid Services cleared its final rule that aligns with provisions in this legislation by tackling the overuse and abuse of prior authorization by Medicare Advantage plans. In addition, the <i>Safe Step Act</i> (H.R. 2630) to provide an exceptions process for medication step therapy protocols and the <i>GOLD CARD Act</i> (H.R. 4968) to exempt qualified physicians from prior authorization requirements were introduced.
CHAMPION FAIR REIMBURSEMENT	The <i>Strengthening Medicare for Patients and Providers Act</i> (H.R. 2474) was introduced. It would provide an annual inflation update for Medicare physician payments based on the Medicare Economic Index MEI. In addition, the <i>Provider Reimbursement Stability Act</i> (H.R. 6371) would modify Medicare's budget neutrality rules and was passed by the House Committee on Energy and Commerce.
FIX THE BROKEN MEDICAL LIABILITY SYSTEM	Legislation to provide liability protection for volunteers during a declared national disaster — the <i>Good Samaritan Health Professionals Act</i> (H.R. 2819) was considered.
ALLEVIATE THE BURDENS OF ELECTRONIC HEALTH RECORDS	The Office of the National Coordinator for Health Information Technology (ONC) at the U.S. Department of Health and Human Services released a proposal updating the ONC Health IT Certification Program to further advance interoperability, improve transparency, and support the access, exchange, and use of electronic health information.
SUPPORT QUALITY RESIDENT TRAINING AND EDUCATION	Legislation to add 14,000 Medicare-funded residency training positions and defer medical student loan interest during medical residency — the Resident Physician Shortage Reduction Act (S. 1302 / H.R. 2389) and the Resident Education Deferred Interest Act (S. 704 / H.R. 1202), respectively — achieved strong bipartisan support. Additionally, the Children's Hospital GME Support Reauthorization Act (H.R. 3887) to extend funding through FY 2028 was passed by the House Committee on Energy and Commerce.
IMPROVE COMPETITION IN THE HEALTH CARE DELIVERY SYSTEM	The Patient Access to Higher Quality Care Act (S. 470 / H.R. 977) to repeal the Affordable Care Act's prohibition on expanding physician-led hospitals was introduced in the House and Senate.
CONTINUE PROGRESS WITH MEDICAL INNOVATION	<i>Ellie's Law</i> (S. 895 / H.R. 902) was introduced and would provide funding at the National Institutes of Health to study brain aneurysms. Additionally, the <i>Gabriella Miller Kids First Research Act 2.0</i> (S. 1624 / H.R. 3391) would provide research funding to study pediatric diseases and was passed by the Senate Committee on Health, Education, Labor and Pensions and the House Committee on Energy and Commerce. Also, the <i>Sunshine Act</i> (H.R. 4402) would allow the provision of medical journal reprints to physicians without open Payments Program reporting.

AANS members who are citizens of the United States and pay dues or have voting privileges may contribute to NeurosurgeryPAC, as may AANS candidate members. All contributions must be drawn on personal accounts and any corporate contributions to NeurosurgeryPAC will be used for administrative expenses and other activities permissible under federal law. Contributions are not tax-deductible. Federal law requires NeurosurgeryPAC to use its best efforts to collect and report the name, mailing address, occupation and the name of the employer of every individual whose contributions exceed \$200 in a calendar year.