



FOR IMMEDIATE RELEASE: July 09, 2013

Contact:

Karen Moore, APR, CPRC, AUA

850-224-0174, karenm@moorecommgroup.com

UROLOGISTS APPLAUD MEMBERS OF CONGRESS FOR THEIR STRONG SUPPORT FOR PRESERVING THE IN-OFFICE ANCILLARY SERVICES EXCEPTION (IOASE)



CHICAGO – The American Association of Clinical Urologists (AACU), American Urological Association (AUA), and Large Urology Group Practice Association (LUGPA) today applauded the 17 members of the Physician’s Caucus of the United States House of Representatives who demonstrated their commitment to preserving patient access to independent, integrated medical services.

In a letter to Speaker John Boehner and Democratic Leader Nancy Pelosi, dated June 28, 2013, members expressed their support for the in-office ancillary services exception (IOASE) to federal self-referral regulations (the “Stark” law), which permits physician practices to provide critical services including radiation therapy, diagnostic imaging, pathology and physical therapy in an integrated and coordinated fashion within their respective practices. The letter states in part:

“Ancillary services are used on a daily basis by physician practices to provide comprehensive services to patients...Limiting the IOASE would present significant barriers to appropriate screenings and treatments, increase inefficiencies, and make care less accessible.”

“Providing comprehensive services to patients through the integration of ancillary services at the point of service improves communications between physicians of different specialties, facilitates the development of coordinated clinical pathways, and enhances the development of disease specific clinical expertise, all of which lead to improved quality at reduced cost,” said Dr. Deepak A. Kapoor, President of LUGPA and Chairman and CEO of Integrated Medical Professionals, PLLC.

The IOASE is considered the cornerstone by which physicians in private practice provide an alternative to less convenient and more expensive sites of service. The letter affirmed the utilization of certain ancillary services have actually decreased in recent years.

“It’s important to note that the letter stated that the volume of advanced imaging services has slowed significantly, from 13.4 percent growth in 2006 to 5.4 percent in 2007,” said Dr. David Penson, AUA Health Policy Chair. “Research shows that the utilization of Intensity Modulated Radiation Therapy, or IMRT, to treat prostate cancer in the Medicare population increased by only 2.2 percent from 2007 to 2011, notwithstanding the approximately 160 percent increase in the number of urologists in practices with ownership of IMRT over that period.”

The leadership of physician members of Congress on this issue is particularly timely as President Obama’s budget proposes to repeal the IOASE provision for radiation, advanced imaging, and physical therapy, which would make it illegal for physician practices to integrate these ancillary services into their practices. The result would force more patients to receive these services in a hospital setting, thereby reducing access and increasing costs - evidenced by cardiologists nationwide being forced to sell their practices to hospitals as a consequence of similar restrictions enacted on certain imaging services.

“In its June 2011 report to Congress, MedPAC acknowledged the financial impact of shifting these services from the physician office to the hospital,” said Dr. Mark S. Austenfeld, President of the AACU. “More than 75 percent of advanced medical imaging is provided in the hospital, where cost of care is equal or greater than care in the physician office.”

The letter reflected the unified desire of the signers to reject the proposed repeal of the IOASE and was signed by the following members of the Physician’s Caucus of the United States House of Representatives.

- Rep. Dan Benishek, M.D. (MI-1)
- Rep. Diane Black, R.N. (TN-6)
- Rep. Charles Boustany, M.D. (LA-7)
- Rep. Paul Broun, M.D. (GA-10)
- Rep. Larry Bucshon, M.D. (IN-8)
- Rep. Bill Cassidy, M.D. (LA-6)
- Rep. Scott DesJarlais, M.D. (TN-4)
- Rep. Renee Ellmers, R.N. (NC-2)
- Rep. John Fleming, M.D. (LA-4)
- Rep. Phil Gingrey, M.D. (GA-11)
- Rep. Paul Gosar, D.D.S. (AZ-4)
- Rep. Joe Heck, D.O. (NV-3)
- Rep. Tim Murphy, Ph.D. (PA-18)
- Rep. Tom Price, M.D. (GA-6)
- Rep. Phil Roe, M.D. (TN-1)
- Rep. Mike Simpson, D.M.D. (ID-2)
- Rep. Brad Wenstrup, D.P.M. (OH-2)

For more information or a copy of the letter, visit lugpa.org.

###

About AACU

The American Association of Clinical Urologists (AACU) is the only national organization to serve urology with the sole purpose of promoting and preserving the professional autonomy and financial viability of each of its members. AACU's resources are dedicated to inform members of the issues affecting their practice and profession, and then to work directly to influence the resolutions of these issues. Forty-five percent of all urologists nationwide are members of the AACU. For more information, visit aacuweb.org.

About AUA

Founded in 1902 and headquartered near Baltimore, Maryland, the American Urological Association is a leading advocate for the specialty of urology, and has more than 20,000 members throughout the world. The AUA is a premier urologic association, providing invaluable support to the urologic community as it pursues its mission of fostering the highest standards of urologic care through education, research and the formulation of health policy. For more information, visit auanet.org.

About LUGPA

LUGPA represents 121 large urology group practices in the United States, with more than 2,000 physicians who make up more than 20 percent of the nation's practicing urologists. LUGPA and its member practices are committed to best practices, research, data collection and benchmarking to promote quality clinical outcomes. For more information, visit lugpa.org.