

AMERICAN SOCIETY OF PLASTIC SURGEONS

2018 State Policy Priorities

The American Society of Plastic Surgeons advocates for policies that serve the interests of patients, advance the specialty, and support its members. ASPS promotes the highest quality patient care, and its member surgeons strive to improve functional capacity and quality of life for patients. To ensure that our health care system is effective and efficient, **ASPS will focus its state advocacy efforts on:**

CORE PRIORITIES

- **Protecting the safety of plastic surgery patients by advancing policies that:**
 - stop efforts to expand non-physician scope of practice to include cosmetic surgical procedures outside of their training; and
 - ensure practitioners must demonstrate competency, unqualified practitioners cannot advertise in a false or misleading way, and clear standards are in law for what can be presented as “board certification.”
- **Stopping any state-based initiatives seeking to levy taxes on cosmetic plastic surgery.**

HIGH PRIORITIES

- **Ensuring physicians and patients are well served by policy responses addressing out of network billing by advancing policies that:**
 - prioritize informing patients about the possibility that they may receive care from an out of network provider;
 - fairly compensate physicians who provide care to fully-informed patients on an out of network basis and in a timely manner; and
 - establish and enforce network adequacy and transparency.
- **Increasing patient protections in office-based surgical settings by working to ensure that providers are currently privileged at a local hospital for the procedures they perform in office-based settings.**

OTHER PRIORITIES

- **Stopping attempts to mandate physician participation with third party payors, including Medicare and Medicaid.**
- **Protecting the value of American Board of Plastic Surgery Certification by opposing attempts by the government to restrict or ban its use in hospital, reimbursement and licensing credentialing.**
- **Ensure that legislation addressing concurrent surgeries does not go too far and implement changes that impact overlapping/staggered surgeries.**