



AMERICAN SOCIETY OF
PLASTIC SURGEONS®



THE PLASTIC SURGERY
FOUNDATION™

Executive Office

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STATE PARTNERSHIP PROGRAM

Cobranded State Action Alerts

2016

The American Society of Plastic Surgeons is committed to identifying opportunities for members to voice their support or concern for legislation to their elected officials. Through the *Aristotle 360* platform, ASPS is able to offer this direct engagement through personalized letter writing campaigns. The ASPS State Partnership Program is pleased to extend the use of this platform to our local, state and regional plastic surgery affiliates through cobranding alerts in an effort to build a greater network of engaged physicians.

Opportunities for Outreach

ASPS conducts grassroots campaigns at pivotal junctures in the legislative process, including full house votes and when legislation is sent to the Governor's desk. On occasion, with the advisement of our state partners, grassroots campaigns are also conducted prior to full house votes to thwart progress of particularly egregious legislative measures.

Audience

Only active ASPS members have access to the aspsgr.aristotle.com website, so our cobranding alerts will go to all state society members who are ASPS members. Physicians in your state who are ASPS members but *not* members of your organization will also receive these messages.

Letter Writing Campaigns

Through the *Aristotle 360* platform, ASPS is able to build action alerts that allow plastic surgeons to write directly to an identified target group, including their state legislators, governor, committee members or bill sponsors. After logging into the site with their ASPS credentials, members are able to edit a template letter. This letter is then sent through the system to the legislative target group.

Reply Yes Campaigns

These campaigns can be utilized after a letter writing campaign has been deployed as a second opportunity for engagement and can occasionally be deployed for other select opportunities. ASPS and the partner society cobrand an alert, and ASPS members are asked to reply "yes" to the email if they would like to sign on. All respondents are added as cosigners of the letter, which is then sent to the legislative target group. These campaigns typically receive between 10-45%-member engagement.

Getting Started

Enclosed are step by step instructions on how to engage with your membership through the State Partnership Program Cobranding State Action Alerts. For additional information about this project, please contact jfrasco@plasticsurgery.org.

Creating a Letter Writing Campaign

Step 1:

ASPS and the state partner society will conduct a conference call to:

- Review the legislative measure
- Identify the timeline
- Confirm that a letter writing campaign is appropriate and timely
- Identify the legislative target group
- Discuss next steps for member engagement

Step 2:

Following the briefing on the legislative issue, the state partner will provide ASPS with a draft template letter that can be used within the campaign. ASPS Government Affairs will review the letter to ensure that ASPS positions are consistent and will provide recommended changes, as needed. Letters should be no more than 2,000 characters (with spacing).

SAMPLE GRASSROOTS LETTER: OPPOSITION TO APRN SCOPE EXPANSION LEGISLATION

As a physician and surgeon in your district, I am writing to urge you to vote against S.B. 717 should it come to the floor for a vote. If enacted, S.B. 717 would remove all collaboration and supervision requirements for advanced practice registered nurses (APRNs), essentially permitting them to step into the role of primary care physicians. I believe this is wholly inappropriate and poses serious patient safety concerns.

Physicians and APRNs go through drastically different training that is in no way equivalent. Most APRNs receive their education through a two- to four-year degree program. In contrast, family physicians are educated through a four-year degree program at an accredited medical school. The physician training process begins with medical school and continues through an accredited residency. During residency family physicians receive three additional years of training before becoming licensed and board certified.

It is only through this depth and duration of training that a doctor becomes prepared to safely and effectively execute all of the functions that S.B. 717 grants to APRNs.

I recognize that the goal of this bill may be to expand access to healthcare in underserved areas, but rigorous studies conducted by the American Medical Association have consistently shown that expanding APRN scope of practice does not achieve that result. In fact, those same studies show that APRNs with expanded scope of practice tend to practice in the exact same areas that are served by established physician populations. In the end, this will ultimately be detrimental to a physician-centered, team-based health care delivery model. This erosion of the team-based health care model will, in turn, negatively impact the quality of patient outcomes.

Thank you for your consideration of my respectful request to vote against S.B. 717.

Step 3:

ASPS staff will build the letter writing campaign within the *Aristotle 360* platform. This typically takes up to one business day to create. Partner society staff will have the ability to view the alert once published through the Executive Director's ASPS ID.

SAMPLE OF A MEMBER-FACING ALERT IN ARISTOTLE 360

The screenshot displays a web interface for a letter writing campaign. At the top, the title is "Help Congress Stop Burdensome Reporting for Global Surgical Codes". Below the title, there are instructions: "Please click on the round green button in the upper right hand corner to update your home address" and "When contacting your elected representatives, remember to: Personalize your message. We have provided you with a template, but feel free to make additional comments. * Be respectful. Be direct in your request for your members of Congress to co-sign the letter." A red note states: "* TO EDIT AND PERSONALIZE YOUR MESSAGES, CLICK ON THE PENCIL ICON NEXT TO YOUR REPRESENTATIVES' NAMES".

The main content area is divided into sections: "Dear Representative Tiberi," "Subject: Please help stop burdensome reporting for global surgical codes." "Introduction" (with a green "Message - Editable" label), and "Conclusion". The "Introduction" section contains a text area with a scroll bar, containing the following text: "In CMS's most recent proposed rule for the Medicare Physician Fee Schedule, a provision is included that would require all practitioners who utilize 10- and 90-day global surgical services codes to report data on all patients receiving these services. While the collection of this data was required by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), the scope of the proposed rule clearly violates the intent of the statute. MACRA required collection of this data from a 'representative sample' of physicians who utilize these codes. By definition, a representative sample – a small subset of a whole population that accurately reflects the characteristics of the whole population – cannot be 'all' of something. CMS is clearly violating congressional intent, and that is wrong. More importantly, though, this reporting will require a major increase in time spent away from my patients. As written, this proposal is very burdensome, and the physician community believes it needs to stop. It is no coincidence that your colleagues leading the charge to stop this change are physicians."

The "Conclusion" section contains the text: "I respectfully urge you to sign this letter and stand for your physician constituents and the patients they serve. If you would like to sign on, or for more information, please contact Jeffrey Lucas in Congressman Bucshon's office at Jeffrey.Lucas@mail.house.gov or Erin O'Quinn in Congressman Bera's office at Erin.O'Quinn@mail.house.gov." At the bottom of the main content area are "SAVE" and "CANCEL" buttons.

On the right side, there is a "Recipients" panel. It includes the text: "To edit a letter for a specific recipient, click on the recipient's name." Below this is a list of recipients, with one entry highlighted in red: "R Representative Pat Tiberi OH-12" with a close button (X) and up/down arrows. Below the list is a "Cancel Editing" button and a large "SEND ALL" button with a right-pointing arrow.

Step 4:

Once the template letter is finalized, ASPS will draft a membership alert. This will be sent out via regular email from the AdvocacyMailbox@plasticsurgery.org to avoid junk mail filters. Once drafted, ASPS will send the alert to the partner society for final review and approval.

SAMPLE OF THE ACTION ALERT EMAIL SENT TO THE MEMBERSHIP

Subject: ASPS Action Alert: Pennsylvania - Help Stop APNs from Practicing Independently in Your State!



AMERICAN SOCIETY OF
PLASTIC SURGEONS®



**Pennsylvania:
Help Stop Advanced Practice Nurses from Practicing Independently Without a
Collaborative Agreement**

The American Society of Plastic Surgeons and the Robert H Ivy Society of Plastic Surgeons have actively opposed legislation in Pennsylvania that would permit Advanced Practice Nurses to practice independently. This legislation would have negative implications for patients throughout the state and will be detrimental to physician-centered, team-based care.

This bill will be voted on by the Pennsylvania State Senate on Monday. It's imperative that your Senator hears from you, their constituent, about the potential ramifications of this proposal. **Send a letter to your Senator urging him/her to oppose this legislation!**

We have already written a template letter for you, so this will take only a minute! Click [here](#) to submit your letter today.

Questions about ASPS's advocacy efforts in your state?

Contact Patrick Hermes, Senior Manager, Advocacy and Government Affairs: phermes@plasticsurgery.org or 847-228-3331

For more information about the Robert H Ivy Society of Plastic Surgeons, how the organization is advocating on your behalf and how to become a member, visit:

www.ivysociety.org

Step 5:

ASPS Government Affairs will deploy the action alert to all ASPS members in the state through the AdvocacyMailbox@plasticsurgery.org. Partner society staff and consultants will be blind copied on all communications to the membership. All members who participate in the alert will receive a confirmation receipt after they submit their letter.

After the alert has been deployed, ASPS can provide metrics to confirm how many (and which) members participated in the alert. ASPS and the state partner society can determine whether additional grassroots engagement is necessary to impact change in the state legislature.

Creating a Reply Yes Campaign

Step 1:

A Reply Yes campaign can be executed under certain circumstances, such as a second opportunity for engagement after a letter writing campaign has been deployed. The partner society will provide ASPS with a draft letter for this campaign. ASPS Government Affairs will review the letter to ensure that ASPS positions are consistent and will provide recommended changes, as needed. Letters should be no more than 2,000 characters (with spacing).

Step 2:

Once the letter is finalized, ASPS will draft a membership alert. This will be sent out via regular email from the AdvocacyMailbox@plasticsurgery.org to avoid junk mail filters. Once drafted, ASPS will send the alert to the state partner for final review and approval.

SAMPLE OF THE ACTION ALERT EMAIL SENT TO THE MEMBERSHIP

Subject: ASPS Action Alert: New York – Reply “YES” and Join Us in Opposing Changes to the Date of Discovery on Medical Malpractice Claims!



NEW YORK:

Reply “YES” and Join Us in Opposing Changes to the Date of Discovery on Medical Malpractice Claims!

Even though the NY legislative session is coming to a close, the NY legislature is seriously considering legislation that that would allow malpractice action to be filed within **ten years** after the date of the alleged malpractice. It is very likely that the legislature will swiftly move this bill through the legislative process and to the Governor’s desk in the next two weeks.

It’s imperative that we show preemptive force to stop the momentum of this bill. Join the American Society of Plastic Surgeons and the New York State Society of Plastic Surgeons in opposing this legislation. [Sign onto the ASPS & NYSSPS letter to the New York state legislature urging them to oppose this bill!](#)

Reply “YES” by Friday, June 3 @ 5pm to sign onto the ASPS & NYSSPS letter. When responding, please provide you full name, with credentials, and your home city.

Questions about ASPS’s advocacy efforts in your state?

Contact Patrick Hermes, Senior Manager, Advocacy and Government Affairs:
phermes@plasticsurgery.org or 847-228-3331

For more information about the New York State Society of Plastic Surgeons, how the organization is advocating on your behalf and how to become a member, visit:
www.nystatesocietyofplasticsurgeons.org

LETTER TO THE NEW YORK STATE LEGISLATURE

*** This is a draft. Please do not send this letter on your own to the New York Legislature. ***

Dear Members of the New York Legislature:

As a plastic surgeon and a constituent, I am writing to express my opposition to A. 285 and S. 6596 which, if enacted, will drive up the cost of and reduce access to health care.

My patients and the quality of care they receive matter to me, so I understand the importance of compensating them when they're injured due to negligence. However, the troubling reality is that most medical malpractice claims are frivolous. Because this legislation will radically increase the statute of limitations for medical, dental or podiatric malpractice through a discovery of injury rule, it will also radically increase the length of time during which such frivolous suits can be brought.

Data from PIAA, an insurance industry trade association of medical liability insurers, shows that 65% of all claims that closed in 2013 were dropped, dismissed or withdrawn. 91% of the remaining cases were won by the physician defendant. In light of the sad truth that the majority of medical malpractice cases filed are baseless, imposing additional costs on the healthcare delivery system is a questionable policy decision.

As you know, the overhead that I and my colleagues pay for medical malpractice insurance is staggeringly high. Moreover, as a physician practicing in New York, I already pay premium rates that are among the very highest in the country, if not the highest. New York lawmakers have recognized this issue and froze medical liability premium rates in 2008 and 2009. However, even with these rate freezes, medical liability premiums have continued to steadily rise. Many physicians pay liability premiums that far exceed \$100,000 and in some cases even exceed \$300,000. A study of similar legislation indicated that if this bill were enacted, medical liability premiums would need to be increased by 15% or more.

The current statute of limitations was originally enacted in order to answer a medical malpractice crisis that occurred in the seventies and eighties. Rolling back this important reform will propel New York back towards another crisis, this time in the form of access to care. The cost of health care delivery is increasing every day. Overhead costs and demands on the resources of medical practices are rising due to: 1) skyrocketing medical liability premiums; 2) declining insurer payments; and 3) increasing government mandates. In fact, a recent study in Health Affairs demonstrates that physicians are spending more than \$15 billion each year on quality reporting. At the same time, the demand for health care services continues to increase due to the aging of the American population and the enactment of federal health care reform.

Taken together, these trends are making the practice of medicine increasingly unattractive. We simply cannot afford to be driving away potential new providers as demands already outpace our system's

capacity. Controlling the cost of medical liability insurance is essential for the health care delivery system to be able to meet the ever growing needs of the citizens of New York, and for physicians to remain in practice.

I appreciate this opportunity to provide comments on A.285/S.6596, and respectfully request that you oppose this legislation.




Sincerely,

Step 3:

ASPS Government Affairs will deploy the action alert to all ASPS members in the state through the AdvocacyMailbox@plasticsurgery.org. State society staff and consultants will be blind copied on all communications to the membership. All physicians who reply “yes” will be added as cosigners of the letter by ASPS. ASPS staff will send a reply to all participants thanking them for engaging in the alert.

In accordance with the specified deadline, ASPS staff will email the final letter to the legislative target group. State society staff and consultants will be copied on communications to the legislature and their staff.

SAMPLE OF THE LETTER SENT TO THE LEGISLATURE

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|  AMERICAN SOCIETY OF PLASTIC SURGEONS® 444 East Algonquin Road • Arlington Heights, IL 60005-4664 847-228-9900 • Fax: 847-228-9131 • www.plasticsurgery.org |  THE PLASTIC SURGERY FOUNDATION™ |  New York State SOCIETY of PLASTIC SURGEONS |
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June 7, 2016

New York State Legislature
The Honorable Carl E. Heastie, Speaker
The Honorable John J. Flanagan, Temporary President of the Senate
State Street and Washington Avenue
Albany, NY 12248

RE: Opposing A.285 & S.6596 – Regarding the Date of Discovery Rule

Dear Members of the New York Legislature:

As a plastic surgeon and a constituent, I am writing to express my opposition to A.285 and S.6596 which, if enacted, will drive up the cost of and reduce access to health care.

My patients and the quality of care they receive matter to me, so I understand the importance of compensating them when they're injured due to negligence. However, the troubling reality is that most medical malpractice claims are frivolous. Because this legislation will radically increase the statute of limitations for medical, dental or podiatric malpractice through a discovery of injury rule, it will also radically increase the length of time during which such frivolous suits can be brought.

Data from PIAA, an insurance industry trade association of medical liability insurers, shows that 65% of all claims that closed in 2013 were dropped, dismissed or withdrawn. 91% of the remaining cases were won by the physician defendant. In light of the sad truth that the majority of medical malpractice cases filed are baseless, imposing additional costs on the healthcare delivery system is a questionable policy decision.

As you know, the overhead that I and my colleagues pay for medical malpractice insurance is staggeringly high. Moreover, as a physician practicing in New York, I already pay premium rates that are among the very highest in the country, if not the highest. New York lawmakers have recognized this issue and froze medical liability premium rates in 2008 and 2009. However, even with these rate freezes, medical liability premiums have continued to steadily rise. Many physicians pay liability premiums that far exceed \$100,000 and in some cases even exceed \$300,000. A study of similar legislation indicated that if this bill were enacted, medical liability premiums would need to be increased by 15% or more.

The current statute of limitations was originally enacted in order to answer a medical malpractice crisis that occurred in the seventies and eighties. Rolling back this important reform will propel New York back towards another crisis, this time in the form of access to care. The cost of health care delivery is increasing every day. Overhead costs and demands on the resources of medical practices are rising due to: 1) skyrocketing medical liability premiums; 2) declining insurer payments; and 3) increasing government mandates. In fact, a recent study in Health Affairs demonstrates that physicians are spending more than \$15 billion each year on quality reporting. At the same time, the demand for health care services continues to increase due to the aging of the American population and the enactment of federal health care reform.

Taken together, these trends are making the practice of medicine increasingly unattractive. We simply cannot afford to be driving away potential new providers as demands already outpace our system's capacity. Controlling the cost of medical liability insurance is essential for the health care delivery system to be able to meet the ever growing needs of the citizens of New York, and for physicians to remain in practice.

I appreciate this opportunity to provide comments on A.285/S.6596, and respectfully request that you oppose this legislation.

Sincerely,

Scot Bradley Glasberg, MD
President
New York State Society of Plastic Surgeons
New York, New York

Kaveh Alizadeh, MD
President- Elect
New York State Society of Plastic Surgeons
New York, New York

Stephen Coccaro, MD
Vice President

Paul R. Weiss, MD
Immediate Past President

| | |
|--|---|
| <i>New York State Society of Plastic Surgeons Setauket, New York</i> | <i>New York State Society of Plastic Surgeons Scarsdale, New York</i> |
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| Keith Blechman, MD <i>Board of Directors New York Regional Society of Plastic Surgeons New York, New York</i> | David Song, MD, MBA <i>President American Society of Plastic Surgeons Chicago, Illinois</i> |
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| Robert A Cooper MD, FACS <i>Rockville Centre, New York</i> | Nicole Nemeth, MD, FACS <i>New York, New York</i> |
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| Michael S Suzman, MD <i>Scarsdale, New York</i> | Elliot W. Jacobs, MD, FACS <i>New York, New York</i> |

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Cc: Members of the New York State Assembly

Members of the New York State Senate