Health and Welfare Committee Louisiana House of Representatives Box 94062 900 North 3rd Street Baton Rouge, LA 70804 via Email: h-hw@legis.la.gov

Re: House Bill 941

Dear Representative Illg, Chairman Bagley, and members of the Health and Welfare Committee:

The undersigned medical specialty societies, comprising physicians who utilize and/or perform interventional spine procedures to accurately diagnose and treat patients suffering from spine pathologies, are writing to express serious concerns regarding proposed House Bill 941 which seeks to establish restrictions on the physician specialties that can perform specific spine procedures.

Our societies have an established track record demonstrating commitment to research, education, and tracking patient outcomes to promote the safest and most effective patient care. While we certainly support any efforts to ensure that patients receive quality care from qualified physicians, this bill is extremely problematic in its attempt to use legislation to outline which physicians are appropriately trained to perform specific procedures. Our societies stand firmly against state legislatures making such decisions.

Physicians, including anesthesiologists, physiatrists, radiologists, and neurologists, with extensive experience performing image-guided spine procedures, are effectively and safely performing minimally invasive procedures worldwide.

Unfortunately, this bill fails to appreciate the distinction between minimally invasive and more complex and invasive surgical procedures. Minimally invasive procedures are performed with a very minimal open exposure, utilize image guidance rather than direct visualization of the surgical field, and are performed in an outpatient setting. Of course, physicians performing minimally invasive procedures must be appropriately trained. Ensuring that physicians have obtained appropriate training prior to performing these procedures should remain in the realm of existing credentialing bodies -- the hospitals and ambulatory surgery centers in which these procedures are performed. Physicians trained in performing minimally invasive spine procedures ensure patients are selected according to clear evidence-defined indications and are committed to tracking the safety and efficacy of these treatments longitudinally.

There is, and should continue to be, an ongoing evolution of percutaneous interventional spine procedures, which is fully within the scope of practice of anesthesiologists,

physiatrists, radiologists, and neurologists. This is akin to the evolution of the now well-established field of interventional cardiology. Common open surgical procedures performed by cardiothoracic surgeons evolved over time to include minimally invasive and percutaneous interventions most often performed by interventional cardiologists – allowing surgeons to focus on helping patients requiring more invasive and involved cardiothoracic surgeries.

Less invasive spine procedures can reduce costs and provide options to patients who may not be candidates for more invasive surgical interventions. These treatments are available to more patients when performed by multiple types of appropriately trained physician specialists. Arbitrarily placing restrictions on the ability of these specialists to perform minimally invasive procedures will have unintended consequences. It will make it more difficult for patients to obtain these procedures, prolong their suffering and reliance on long-term opioid use, and contribute to the ongoing opioid crisis.

The undersigned societies appreciate the opportunity to express our significant concerns and hope you take them under advisement when considering this egregiously misguided bill. We trust that you share our commitment to ensuring access to safe, high-quality care for patients. We also offer our expertise and input in future discussions related to spine and pain interventions. If you have any questions or wish to discuss any of our suggestions, please contact Belinda Duszynski, Senior Director of Policy and Practice at the Spine Intervention Society, at bduszynski@SpineIntervention.org.

Sincerely,

American Academy of Pain Medicine
American Academy of Physical Medicine and Rehabilitation
American College of Radiology
American Society of Anesthesiologists
American Society of Neuroradiology
American Society of Spine Radiology
Society of Interventional Radiology
Spine Intervention Society