

Congress of  
Neurological  
Surgeons

August 13, 2020

Seema Verma, MPH, Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Washington, DC

**SUBJECT: COVID-19 and Graduate Medical Education Funding**

Dear Administrator Verma:

On behalf of the American Academy of Neurological Surgeons, American Association of Neurological Surgeons, American Board of Neurological Surgery, Congress of Neurological Surgeons and Society of Neurological Surgeons, we are writing to make you aware of a potential threat to residency training programs caused by the COVID-19 shutdown.

As you know, graduate medical education (GME) is primarily financed by Medicare with direct GME funds (DGME). Each teaching hospital has a limit (cap) on the number of positions based on several metrics. When a new teaching hospital opens, it has a five-year period during which it must establish Accreditation Council for Graduate Medical Education-accredited positions. The process of applying for, receiving accreditation and matching residents to these positions is time-consuming — requiring a minimum of three years.

One of the steps in the process is for the Accreditation Council for Graduate Medical Education (ACGME) to send site visitors to evaluate the institution and personnel involved in training. Since the COVID-19 shutdown, however, the ACGME has had to suspend site visits and has only now begun to consider restarting the process. As a result, there is a large backlog of site visits to schedule. Restarting the site visit process is further hampered by existing and any new travel restrictions as COVID-19 cases spike. All of the programs currently in the process of applying for accreditation are, therefore, caught in this time-limit predicament and could lose DGME funding if accreditation is delayed beyond the institution's cap deadline. Accordingly, institutions must decide whether to allow these programs to complete their applications outside the cap deadline and risk having to finance the entire program without Medicare funding — a consequence of significant concern given the financial hardships our academic medical centers are experiencing as a result of the COVID-19 pandemic.

To prevent this outcome, **we are asking you to consider extending the DGME cap deadlines for institutions currently undergoing the accreditation process to account for delays caused by the COVID-19 crisis. We believe that a one-year extension of all current cap deadlines should enable the ACGME and institutions to complete the accreditation process.** Granting such an extension would not increase the overall cost of funding these programs since they are already allocated and accounted for in the DGME system. Rather, it would only delay the commencement of

these payments. This flexibility is particularly vital for GME-naïve institutions that are trying to sequentially build programs that may have longer training requirements, such as neurosurgery's seven-year residency program.

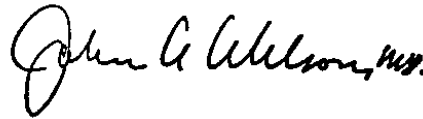
Given the documented shortage of physicians now and into the future, we believe providing these institutions some leeway to complete the accreditation process is the right thing to do to avoid any unnecessary reductions in the number of residency positions available to train the next generation of physicians.

Thank you for considering our request. If you have any questions or need additional information, please do not hesitate to contact us.

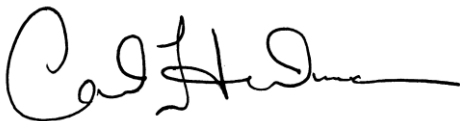
Sincerely,



M. Sean Grady, MD, President  
American Academy of Neurological Surgery  
Society of Neurological Surgeons



John A. Wilson, MD, President  
American Association of Neurological Surgeons



Carl B. Heilman, MD, Chair  
American Board of Neurological Surgery



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