

## **AMERICAN SOCIETY OF PLASTIC SURGEONS**

2025 State Legislative & Regulatory 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 the scope of practice for non-physicians to include cosmetic surgery.
- Opposing nurse practitioner (NP) independent practice and restricting physician assistant (PA) scope of practice to maintain a team-based practice model.
- Guaranteeing clear standards are in law for what can be advertised as "board certification."

## **HIGH PRIORITIES**

- Increasing patient protections by ensuring providers are currently privileged for the procedures they perform in office-based settings.
- Stopping any state-based efforts to tax cosmetic surgery.
- Ensuring fair compensation for physicians who provide out-of-network care.
- Requiring non-physician providers who are granted independent practice to purchase medical liability insurance at least as much as a physician.
- Ensuring state laws regulating insurance have adequate coverage guarantees for breast reconstruction surgery that apply to all types/techniques of post-cancer breast reconstruction, chest wall reconstruction, and custom fabricated prostheses on an in-network basis.
- Restricting insurers from clawing back and/or eliminating prior authorization retroactively.

## **OTHER PRIORITIES**

- Regulating the standard of care for gluteal fat grafting that requires injection in the subcutaneous space, above the gluteal fascia, and the use of real-time imaging during injection.
- Ensuring physicians and patients are well-served by policy responses addressing out-of-network billing by advancing policies that fairly regulate balance billing and inform patients about coverage.
- Supporting mandated breast cancer patient education on breast reconstruction following a cancer diagnosis and before oncological treatment.
- Ensuring that patients are notified of the possibility of receiving out-of-network care, including all potential financial responsibilities in excess of their in-network cost-sharing amounts.
- Supporting sustained or increased gender affirmation surgical coverage for adults.
- Alleviating the requirement of two patient decision checklists for every breast implant patient: the one currently required by the FDA, and another, duplicative checklist, mandated by state law.