Neurologists are critical in evaluating and caring for patients with acute neurologic illness, including stroke, but it is increasingly difficult for neurologists to do so. Since most communities support few neurologists, a disproportionate call burden falls to each and, when called, the neurologist often must abandon an office filled with other ill patients. Increased malpractice liability, increased office overhead, and inadequate reimbursement for emergency services have combined to make it difficult for neurologists to care for people with emergent illness. There is a growing imbalance in the American medical system which forces neurologists to choose to limit or abandon emergency coverage in favor of other, needed professional services in their communities. On the other hand, hospitals benefit from emergency department services which support other diagnostic facilities, operating rooms, and inpatient beds. Furthermore, hospitals have multiple revenue services to support the emergency department including grants, insurance payments, charity and low cost loans.

The American Academy of Neurology believes that patients and communities will have better access to emergency neurologist services for stroke and other illnesses when neurologists are reimbursed at a fair market value to be on call.

Emergency department coverage represents a disproportionate demand on neurologists and a service to hospitals which goes beyond service to the community, which should be recognized and reimbursed separately from payment for patient care.

Policy Statement History

Reviewed and approved by the MEM on October 4, 2012; approved by the AAN Board of Directors on June 28, 2013. AAN Policy since June 28, 2013.