



AMERICAN ACADEMY OF
ORTHOPAEDIC SURGEONS

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March 23, 2020

Brad Smith
Deputy Administrator for Innovation & Quality and
Director, CMMI
Centers for Medicare and Medicaid Services
7500 Security Boulevard Baltimore, MD 21244

Amy Bassano
Deputy Director, CMMI
Centers for Medicare and Medicaid Services
7500 Security Boulevard Baltimore, MD 21244

Re: Emergency Flexibilities in the CMMI Payment Models

Dear Director Smith and Deputy Director Bassano:

On behalf of over 34,000 orthopaedic surgeons and residents represented by the American Association of Orthopaedic Surgeons (AAOS), we would like to thank the teams at the Centers for Medicare and Medicaid Services (CMS) and the Center for Medicare and Medicaid Innovation (CMMI) for swiftly responding to stakeholder needs amidst these unprecedented times. Earlier, I wrote to my colleagues in support of Administrator Verma's guidance on elective surgery which can be found [here](#).¹ We understand that the Patient Care Models Group at CMMI is currently working to provide guidance on flexibilities and relief to model participants. **Therefore, we urge CMMI to immediately forgive any losses recognized by participant groups in BPCI Advanced.**

In line with the CMS COVID-19 guidance on elective surgeries, as well as similar guidance issued from various health systems and professional surgery organizations, case volumes for BPCI Advanced surgical episodes have plummeted. At this point in time, only emergent trauma cases are being included in the BPCI Advanced program. AAOS is concerned by the potential exposure of current BPCI Advanced post-acute care patients to the rampant viral infection. This exposure may lead to increased readmissions and skew outcomes for the episodes. Thus, the expected BPCI Advanced patient populations are expected to have a much greater concentration of "high-risk" patients with compromised health status. Consequently, this will have an adverse impact on target prices for these episodes.

Unfortunately, AAOS members have shared that orthopaedic practices are rapidly losing physicians, other clinicians and staff to quarantine and other caregiving necessities. Some practices have had to cease operating after physicians and staff were potentially exposed to the virus. Many practices are unable to meet payroll commitments and laying off staff due to the

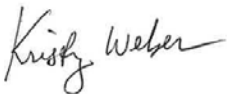
¹ <https://www.aaos.org/about/covid-19-information-for-our-members/message-from-aaos-president/>

pause of elective surgery procedures.²

For these reasons, we urge CMMI to expedite the release of Net Payment Reconciliation Amount (NPRA) payments. By the same token, CMMI should delay negative reconciliation payment timelines, or allow for certain forgiveness allowances. A guidance for conveners to share their receipts from CMMI immediately with physician group practices would also be helpful.

As you are aware, orthopaedic surgeons are at the front line of the value-based care movement while running small practices. Hence any and every flexibility that you can offer will be helpful at this time of need. We appreciate the prompt actions taken by CMS, CMMI and the Administration in response to requests precipitated by this public health emergency. If you have any questions, please do not hesitate to contact Shreyasi Deb, PhD, AAOS Senior Director, Health Policy by email at deb@aaos.org.

Sincerely,



Kristy L. Weber, MD, FAAOS
President, American Association of Orthopaedic Surgeons

cc: Christina Ritter, PhD, Director, Patient Care Models Group, CMMI
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² Coronavirus: New England Orthopedic Surgeons furloughs half its workforce (March 23, 2020). Available: <https://www.masslive.com/coronavirus/2020/03/coronavirus-new-england-orthopedic-surgeons-furloughs-half-its-workforce.html>