



## PROTECTING SENIORS' ACCESS TO MEDICARE ACT

The AAOS recognizes the importance of lowering health care costs and is committed to providing quality care that is cost-effective. Since Medicare was first enacted, members of Congress have played an essential role in shaping policies that best meet the needs of their communities and their constituents to ensure that the health care system is equipped to care for diverse populations across the country. Unfortunately, the Independent Payment Advisory Board (IPAB), created by the Affordable Care Act (ACA), threatens the ability of the people's elected representatives in Congress to ensure seniors have access to the health care they need, when they need it.

The IPAB is mandated to include 15 unelected, unaccountable members. Fewer than half of the IPAB members can be health care providers, and no member can be a practicing physician or otherwise employed. **AAOS opposes the IPAB and believes such a group should not be making these spending decisions.**

### Why IPAB Repeal Matters:

Not only does the creation of the IPAB severely limit congressional authority, it essentially eliminates the transparency of hearings and debate and precludes the meaningful opportunity for stakeholder input. Further, requiring the IPAB to achieve savings in one-year increments is not conducive to generating savings through long-term delivery reforms. IPAB recommendations are to be "fast tracked" and will automatically go into effect unless Congress passes an alternative proposal that achieves similar savings or votes to reject the proposal (with a 60 vote supermajority needed in the Senate).

In addition, providers representing roughly 37 percent of all Medicare payments, including hospitals and hospice care, are exempt from IPAB cuts until 2020; thus, IPAB-directed cuts will disproportionately fall on the non-exempt providers and suppliers, including orthopaedic surgeons. This cut could take place in just a few years, with the Medicare per capita growth rate projected to exceed the per capita target growth rate in 2017.<sup>1</sup> **If the board is not eliminated, IPAB-directed cuts to health care provider payment will result in reduced access to care and higher health care costs for patients.**

### H.R. 1190/S. 141—The Protecting Seniors' Access to Medicare Act of 2015:

- **Eliminates sections of the ACA that deal with IPAB.** The legislation would eliminate sections 3403 and 10320 of the ACA, which define the IPAB Board and its responsibilities, outline its membership, and establish a process for making ongoing payment modifications and cuts.

### What Congress Should Do:

**Congress should oppose the IPAB and eliminate it legislatively through H.R. 1190/S.141, the *Protecting Seniors' Access to Medicare Act*.**

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<sup>1</sup> <http://www.aaos.org/AAOSNow/2015/Sep/cover/cover2/>

