

REGULATORY RELIEF FOR COORDINATED CARE

The health care industry is one of the most heavily regulated industries in the United States. As a result, physicians across the country are forced to keep pace with ever-changing rules on ownership issues, electronic health systems, and new payment models, among other things. Increasingly, physicians and other clinical staff are pulled away from patient care, diverting limited resources and energy to regulatory compliance. These burdens result in a system that oftentimes hinders – instead of helps – physicians’ abilities to provide high-quality care for their patients.

The AAOS is encouraged by recent actions taken by Congress and the Administration to reduce the regulatory burden. To help ensure that patients can continue to receive high-quality care, the AAOS urges Congress to continue to look at opportunities to relieve physicians of these regulatory burdens.

Regulatory Relief in the Bipartisan Budget Act

The AAOS was extremely pleased to see that Congress included several regulatory relief efforts and positive updates to the Medicare Access and CHIP Reauthorization Act (MACRA) in the Bipartisan Budget Act (BBA), which was signed into law earlier this year.

- **Repeal of the Independent Payment Advisory Board (IPAB):** Repealing the IPAB ensures that patients will continue to have access to high-quality care and that health care delivery reforms can be completed thoughtfully with long-range goals in mind. It also ensures that members of Congress will continue to be able to advocate for their constituents, and that the transparency of hearings, debate, and meaningful stakeholder input will remain intact.
- **MACRA Updates:** Among other things, the BBA made needed improvements to the MIPS low-volume threshold and the cost performance category. It also provided CMS with flexibility in setting the performance threshold. These updates will help protect the physician-patient relationship and ensure orthopaedic surgeons can continue to deliver care for their patients.

Additional Opportunities for Regulatory Relief

- **Interoperability:** Health information technology (HIT) is a fundamental component in improving our nation’s health care system. However, the current HIT infrastructure does not provide for efficient electronic exchange of patient information. Interoperability should be further encouraged and providers should not be held responsible for HIT limitations outside of their control.
- **Stark law reform:** The self-referral prohibitions enacted nearly 30 years ago make it difficult for today’s physician practices to fully and successfully participate in APMs and other care coordination efforts. These prohibitions stifle care delivery innovation by inhibiting practices from incentivizing physicians to deliver patient care more effectively and efficiently – it is time for Congress to reform the Stark law and provide flexibility to support high-quality, coordinated care.
- **Access barriers:** Time spent persuading insurance companies to cover a procedure is not only expensive, but also may detract from patient care. Congress should work to automate, make more uniform, and establish timeframes for prior authorization and other administrative transactions. Further, Congress must ensure network adequacy and sufficient access to specialty care.