



AMERICAN ACADEMY OF  
ORTHOPAEDIC SURGEONS

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March 28, 2016

The Honorable David Scott  
United States House of Representatives  
225 Cannon House Office Building  
Washington, DC 20515

Dear Congressman Scott,

On behalf of over 18,000 board-certified orthopaedic surgeons, the American Association of Orthopaedic Surgeons (AAOS) would like to commend you for introducing H.R. 4848, the Healthy Inpatient Procedures Act of 2016.

The AAOS supports the efforts of all stakeholders to develop and evaluate payment methodologies that will incentivize coordination of care among providers and help curb health care inflation. Additionally, the AAOS embraces change that improves quality and lowers cost, but the patient must always be the primary focus of all initiatives. In November of 2015, CMS finalized a new Medicare payment model for joint replacement surgery called the Comprehensive Care for Joint Replacement (CJR) model, which is set to begin on April 1, 2016. The model targets the most common inpatient surgeries for Medicare beneficiaries: hip and knee replacements, both elective and non-elective, as well as other lower extremity joint replacement procedures and the repair of hip fractures.

The model that CMS introduced requires comprehensive planning and coordination between hospitals, physicians, and post-acute care providers, as well as complete infrastructural support. However, from the date the final rule was released, CMS has given doctors and hospitals less than five months to prepare for the implementation of this complex payment model. The AAOS believes that full scale implementation of the CJR model on April 1, 2016 is unrealistic and likely to cause disruption to normal patient access and care patterns.

H.R. 4848, the Healthy Inpatient Procedures Act of 2016, would address these concerns by delaying CJR implantation until January 1, 2018. This delay would ensure that physicians, hospitals, and post-acute care providers have adequate time to prepare for the onset of this complex payment system. By allowing providers and hospitals the necessary time to adapt, this legislation will ensure that patients can continue to receive the highest quality health care services.

Again, the AAOS commends the efforts put forth in this legislation to provide a much needed delay in implementation of the Comprehensive Care for Joint Replacement program. Please feel free to contact Catherine Boudreaux, AAOS Senior Manager of Government Relations ([boudreaux@aaos.org](mailto:boudreaux@aaos.org)), if you have any questions or if the AAOS can serve as a resource to you.

Sincerely,

Gerald R. Williams, Jr., MD  
President  
American Association of Orthopaedic Surgeons