

## CMS Merely Soliciting Comments on Including Total Joints as ASC Procedures

Articles August 28, 2017

CMS released the proposed update for the Hospital Outpatient Perspective Payment System and the Ambulatory Surgery Center System on July 13, 2017, and the release has generated some unexpected controversy regarding the inclusion of total joints as ASC covered procedures for Medicare.

One page 424, under the heading “Proposed Additions to the List of ASC Covered Surgical Procedures”, which starts on page 419, CMS announced it is “soliciting comments” in the 2018 proposed rule regarding coverage inclusion of the following two procedures:

- CPT 27125: Hemiarthroplasty, hip
- CPT 27130: Total Hip Arthroplasty

You must note that this release is merely soliciting comments; it has not yet proposed inclusion of those procedures.

However, it is worth noting the trend toward coverage of total joint replacement as outpatient procedures. Becker’s ASC review recently cited a report by a consulting firm, i.e. Sg2, stating that outpatient hip replacement is projected to increase by 600% over the next decade. Many commercial insurance carriers already cover same day joint replacement, but coverage by CMS will require proof of consistent quality outcomes, and overcoming significant resistance by the inpatient providers.

In Modern HealthCare’s’ August 7, 2017 edition, the cover page lists the lead article, “Outpatient Exodus”, stating that hospitals are wary of CMS’ plan to cover joint replacements in surgery centers because of the significant adverse impact on hospital volume and revenue.

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