

April 27, 2015

Patrick Conway, MD
Deputy Administrator for Innovation & Quality
CMS Chief Medical Officer
Centers for Medicare and Medicaid Innovation
7500 Security Boulevard
Baltimore, MD 21244

RE: Hip Fractures in BPCI

Dear Dr. Conway:

The American Association of Hip and Knee Surgeons has reviewed the work of the Association of American Medical Colleges (AAMC) evaluating the impact of hip fractures in the major joint replacement bundle in BPCI and we support the recommendation to create a new DRG for hip fractures. The AAMC conducted an evidence-based review of the national impact of this unique sub-population on the more than 70% of BPCI Phase 2 national participants (Lewin Year One evaluation) who have selected major joint replacement of the lower extremity. The analysis and recommendations focus on traumatic hip fractures repaired by total or partial arthroplasty (DRG 469/470).

The AAMC analysis showed variation in both hip fracture rate, as well as potential savings/losses in BPCI for this episode of care. The overall AMC hip fracture rate for their AMCs is similar to the overall Medicare rate: fractures comprise 13% of major joints episodes among our bundlers, as compared with 14% for DRGs 469/470 for the full Medicare claims file. In the AAMC sample, fractures comprise 11% of all episodes in DRG 470 (without MCCs), yet fractures comprise 50% of all episodes in DRG 469 (with MCCs). The AAMC also found that despite the overall fracture rate across all their AMCs remaining stable over the past 5 years, individual AMCs have not experienced this stability.

AAHKS joins with the AAMC in advocating new care design strategies to improve outcomes with a unique focus on hip fracture/MJR patients and provide a solution for the dilemma of changing rate of hip fractures not anticipated from the baseline period.

We urge CMS to seriously consider the alternative solutions proposed by AAMC, that CMS either creates a new DRG for hip fractures (and keeps the new DRG within the current MJR episode) or moves all hip fractures to DRG 469 since hip fracture patients are more similar to other 469 patients with complications.

Sincerely,

A handwritten signature in black ink, appearing to read "Jay R. Lieberman". The signature is fluid and cursive, with the first name "Jay" being particularly prominent.

Jay R. Lieberman, MD
President
AAHKS

Cc:

William A. Jiranek, MD
David A. Halsey, MD
Mark I. Froimson, MD
Rich Iorio, MD
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