

# UPDATE

FEB  
2018

A MEMBER PUBLICATION OF THE AMERICAN ASSOCIATION OF HIP AND KNEE SURGEONS

INSIDE



## 2017 YEAR IN REVIEW

### Membership Growth Continues

In 2017, AAHKS welcomed its 3,600th member, continuing our remarkable growth rate that has averaged 15% annually over the last four years. The continued growth in members is the result of the on-point strategic direction provided by the Board as well as the hard work of committee chairs, members, and staff who conduct the activities of the Association.

### Member Benefit Added

AAHKS provided members with full access to OrthoEvidence to assist in accessing high quality research for implemented evidence-based changes into practice. OrthoEvidence identifies, analyzes, summarizes, and grades the top 5% of published research content and makes it available in an easy-to-read ACE (Advanced Clinical Evidence) format for users. Full access normally costs \$110 annually.

### Spring Meeting Draws Interest

Building on the success of our first Spring Meeting, AAHKS conducted the 2017 Spring Meeting in May in San Francisco. The Spring Meeting is designed to provide a different, more individualized learning experience in a small-group, case-based discussion setting. The 2018 Spring Meeting will take place May 4–5 in Miami.

### New Leaders Elected

Elections conducted at the Annual Business Meeting in November resulted in the selection of Richard Iorio, MD as the 2018–2019 Third Vice-president and James A. Browne, MD and Mark J. Spangehl, MD as Board Members-at-Large for 2018–2020.

### Advocacy in Washington, D.C. Expands

Leadership of the Association committed substantial time and energy to represent the interests of members and patients in Washington, D.C. Several meetings took place with the HHS Secretary and his policy team as well as the CMS Administrator and other high-ranking officials. On Capitol Hill, our message was presented in over 40 visits to legislative and committee offices. AAHKS conducted the first annual advocacy retreat. The Association joined the OrthoPAC Advisor's Circle and had a member named to the OrthoPAC Board. Senator John Barrasso, an orthopaedic surgeon, spoke at the Annual Meeting, and other Members of Congress from both sides of the aisle were invited to attend AAHKS functions in the coming year.

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# AAHKS

## 2018 SPRING MEETING

MAY 4 – 5, 2018 • MIAMI, FLORIDA, USA

# Register Now.

### The InterContinental Miami

- Case-based learning
- Small-group setting
- Peer-to-peer education
- Expert faculty

Visit [www.AAHKS.org](http://www.AAHKS.org)  
for meeting details



## 2017 YEAR IN REVIEW (CONT.)

### Most Successful Match Conducted

The 2017 Match for Adult Reconstruction and Tumor Fellowship positions was the most successful match to date. Ninety programs participated with 169 applicants matching – an increase of nine over the 2016 Match. These fellowship programs will start in August.

### Residents Receive Practical Training in Arthroplasty Skills

AAHKS again organized resident lab courses at three sites, in partnership with the AAOS, The Hip Society and The Knee Society. A total of 163 residents participated in the courses. This was an increase of 15 from the 2016 total. Skills learned in the course will lead to proficiency in hip and knee arthroplasty. Residents practice bone cuts, correct ligament balancing for TKA, determining correct implant sizing, restoring biomechanics in THA and more using anatomical specimens under the guidance of expert faculty.

### Members Head Academy Leadership

AAHKS member William J. Maloney, MD became the 2017–2018 President of the American Academy of Orthopaedic Surgeons (AAOS). AAHKS member David A. Halsey, MD, became First Vice-president. Leaders of the Academy and AAHKS met during the Annual Meeting to brief each other and discuss strategies for continued cooperation and unity.

### Annual Meeting Held

AAHKS conducted the 2017 Annual Meeting in November at the Hilton Anatole in Dallas. The Annual Meeting drew a growing number of arthroplasty surgeons interested in practice-changing clinical content.

The 2017 keynote address was a discussion among four leaders of organized medicine, including the only modern orthopaedic surgeon to serve as AMA President, joined by the AAOS President, the Chair of the American Joint Replacement Registry (AJRR) and the AAHKS President.

### FARE Issues Research Grants

Funded by a \$1.5 million donation from AAHKS, our Foundation for Arthroplasty Research and Education (FARE) began distributing research grants in 2017. Under the guidance of the Research Committee, two multi-center studies were supported for a total of over \$100,000.

### International Interchange Improves Knowledge

The Association participated in four co-branded meetings in Europe and Latin America, and AAHKS was designated as “Guest Society” at the British Hip Society conference in London. Highlights of the most recent Annual Meeting were among the most well-received presentations. Over 35 new International Members joined AAHKS as a result of our presence at those meetings. AAHKS welcomed the Colombian Orthopaedic and Traumatology Society (SCCOT) and European Hip Society (EHS) to Dallas as our 2017 Guest Societies.

### Association Ends Year in Strong Financial Position

Buoyed by strong revenue growth and disciplined spending, the Association finished the year with a surplus. The Association continues expanding activities in support of the AAHKS mission without raising dues or meeting registration fees for members.

## RENEW YOUR MEMBERSHIP IN AAHKS!

In a recent member survey, “staying current on information about the profession” was cited as one of the top reasons to be an AAHKS member. With the *Journal of Arthroplasty*, *Arthroplasty Today* and the AAHKS Annual Meeting, members are in touch with issues that impact their practices every day. Members also cite relevant CME, networking, advocacy efforts and belonging to a collegial community as the other top reasons to belong to AAHKS.

Dues invoices were emailed to members in December, and the Membership Department would like to thank those who have renewed. If you have not yet paid dues for the 2018 membership year, you can log into [www.AAHKS.org](http://www.AAHKS.org) and pay with a credit card. If you prefer to mail a check, send payment to AAHKS 9400 W. Higgins Road, Suite 230, Rosemont, IL 60018-4976. Please contact Eileen Lusk, Director of Membership, at [eileen@aaahks.org](mailto:eileen@aaahks.org) or 847–430–5071 with any questions.

# THE 2017 AAHKS AWARDS



## The James A. Rand Young Investigator's Award

Presented to  
Brian T. Nickel, MD,  
Durham, North Carolina

*Battling the Opioid Epidemic  
with Prospective Pain Threshold  
Measurement*

### Co-Authors:

Mitchell R. Klement, MD  
William A. Byrd, MD  
David E. Attarian, MD  
Thorsten M. Seyler, MD, PhD  
Samuel S. Wellman, MD



## The Lawrence D. Dorr Surgical Techniques & Technologies Award

Presented to  
William G. Hamilton, MD,  
Alexandria, Virginia

*"Running Two Rooms" Does Not  
Compromise Outcomes or Patient  
Safety in Total Joint Arthroplasty*

### Co-Authors:

Henry Ho, MS  
Nancy L. Parks, MS  
James F. McDonald, III, BS  
Robert H. Hopper, Jr., PhD  
Nitin Goyal, MD  
Kevin B. Fricka, MD  
C. Anderson Engh, MD



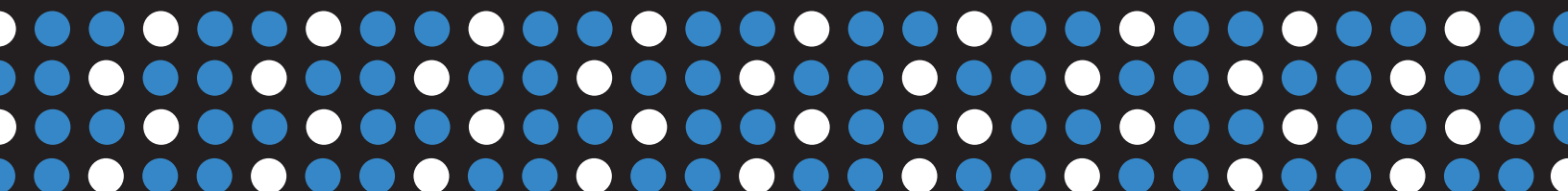
## The AAHKS Clinical Research Award

Presented to  
Simon W. Young, MBChB FRACS,  
Auckland, New Zealand

*Intraosseous Regional Prophylaxis  
Provides Higher Tissue Concentrations  
in High BMI Patients in Total Knee  
Arthroplasty: A Randomized Trial*

### Co-Authors:

Joon Chin, MBBS  
Grant Moore, BS  
Mei Zhang, PhD  
Henry D. Clarke, MD  
Mark J. Spangehl, MD





## CONGRATULATIONS, DR. DORR!

AAHKS wishes to congratulate Lawrence D. Dorr, MD on receiving the 2017 AAHKS Humanitarian Award. Dr. Dorr received the award in recognition of his founding role and continuing participation in Operation Walk missions.

Dr. Dorr is a pioneer and leader in joint replacement surgery in the United States. He was inspired at the age of 5 to become a surgeon and his passion to take care of others has never wavered. While on a teaching trip to Russia, he realized that he could better teach physicians by demonstrating surgery. He also realized that he could bring surgical skills and healing processes to the poorest of the world's poor while teaching in-country physicians. This inspired his idea for Operation Walk.

Dr. Dorr quickly recruited a team of surgeons, internal medicine doctors, anesthesiologists, nurses, and physical therapists to join him in the first Operation Walk trip to Havana, Cuba. The team spent eight months getting all of the implants, medications, surgical supplies and postoperative supplies ready to be transported to Havana. All supplies were donated, and physicians paid their own way.

On that first trip to Cuba, 45 joints were successfully replaced in three days—allowing patients to walk again after many years of immobility. Hip replacements made it possible for one woman to have a child whom she named, “Larry.” The team was exhilarated and full of enthusiasm to plan the next Operation Walk. Over the next ten years, Operation Walk teams returned to Cuba six times, helping more than 250 patients. Dr. Dorr has created 14 teams in Operation Walk's 20 years and still finds each trip as thrilling as the first.

The AAHKS Humanitarian Award recognizes AAHKS members who have distinguished themselves by providing humanitarian medical services and programs with a significant focus on musculoskeletal diseases and trauma including the hip and knee in the United States or abroad.

Nominations for the 2018 AAHKS Humanitarian Award are now being accepted through April 15, 2018 at [www.AAHKS.org/Humanitarian](http://www.AAHKS.org/Humanitarian).



## “CHICK” YATES RECEIVES AAHKS PRESIDENTIAL AWARD

Adolph “Chick” J. Yates, Jr., MD received the 2017 AAHKS Presidential Award for his outstanding service to AAHKS on Saturday, November 4, 2017 during the 2017 AAHKS Annual Meeting. AAHKS President, Mark I. Froimson, MD, MBA, cited Dr. Yates’ tireless, behind-the-scenes work for AAHKS in the quality, performance measures and advocacy arenas that earned him the award. He cited some of the numerous roles Dr. Yates has held with AAHKS including currently serving as the Evidence Based Medicine Committee Chair since 2013, Vice-Chair since 2007, interfacing with agencies, committees and task forces such as CMS, FDA, NQF, AAOS, BOS and MedCAC.

In the presentation of the award, Dr. Froimson stated, “You are an amazing resource for AAHKS and an invaluable partner in addressing all things quality and measure related and your voice during board and committee meetings commands our attention. But most important, you are a friend and true advocate for our patients, our colleagues and the profession. We are all better because of our interactions with you.”

# AAHKS POSTER AWARDS

The following posters were selected as the best in their category during the 2017 AAHKS Annual Meeting.

## Primary Total Hip Arthroplasty

*Does Timing of Primary Total Hip Arthroplasty Prior to or After Lumbar Spine Fusion Have an Effect on Dislocation and Revision Rates?*

**Arthur L. Malkani, MD;**  
**Kevin Himschoot, MD;**  
**Kevin Ong, PHD;**  
**Edmund Lau, PHD;**  
**Doruk Baykal, PHD;**  
**John Dimar, MD;**  
**Steven Glassman, MD;**  
**Daniel J. Berry, MD;**

## Primary Total Knee Arthroplasty

*Unsupervised Home Exercise Provides Equivalent Outcomes to Traditional Outpatient Physiotherapy after Primary Total Knee Arthroplasty: A Randomized Controlled Trial*

**Andrew N Fleischman, MD,**  
**Meredith Crizer, BS,**  
**Majd Tarabichi, MD,**  
**Richard H. Rothman, MD, PhD,**  
**Jess H. Lonner, MD,**  
**Antonia F. Chen, MD, MBA**

## Revision Total Hip Arthroplasty

*Contemporary Dual Mobility Bearing Wear at Five Years: Are There Concerns with Additional Interfaces for Wear?*

**R. Michael Meneghini, MD,**  
**Khalid A. Azzam, MD,**  
**Evan R. Deckard, BS,**  
**Mary Ziemba-Davis, PHD**

## Revision Total Knee Arthroplasty

*Hospital Costs of Aseptic Revision Total Hip and Knee Arthroplasty Differ by Primary Operative Indications*

**Mario Hevesi, MD,**  
**Jie J Yao, BA,**  
**Hilal Maradit-Kremers, MD, MSc,**  
**Sue L Visscher, PHD,**  
**Jeanine E. Ransom, MS,**  
**David G. Lewallen, MD,**  
**Daniel J. Berry, MD**

## Infection

*Pre-Operative Glycemic Control Predicts Peri-Operative Serum Glucose Levels in Patients Undergoing Total Joint Arthroplasty*

**Brian M Godshaw, MD,**  
**Connor Ojard, MD,**  
**Robert Fischer, BS,**  
**Tyler Adams, BS,**  
**Leslie Thomas, MD,**  
**George F. Chimento, MD, FACS,**  
**Brad S. Waddell, MD**

## Complications not Including Infection

*Low-Dose Aspirin has Non-Inferior Chemoprophylactic Effect on Venous Thromboembolism after Total Knee Arthroplasty*

**Mhamad Faour, MD,**  
**Nicolas S Piuze, MD,**  
**David P. Brigati, MD,**  
**Alison K Klika, MS,**  
**Michael A. Mont, MD,**  
**Wael K. Barsoum, MD,**  
**Carlos A. Higuera, MD**

## Non-Arthroplasty

*Similar Outcomes Between Patients Managed with PAO Alone Versus PAO and Simultaneous Hip Arthroscopy for the Management of Developmental Dysplasia of the Hip*

**Cody C. Wyles, MD,**  
**Mario Hevesi, MD,**  
**Douglas Bartels, MD,**  
**Robert T. Trousdale, MD,**  
**Rafael Sierra, MD**

## Health Policy

*Can Total Knee Arthroplasty Be Performed Safely as an Outpatient in the Medicare Population?*

**P. Maxwell Courtney, MD,**  
**Mark I Froimson, MD, MBA,**  
**R. Michael Meneghini, MD,**  
**Gwo-Chin Lee, MD,**  
**Craig J. Della Valle, MD**

## Large Administrative Database Study

*Variation in Treatment Patterns Influence Outcomes in the Management of Displaced Femoral Neck Fractures: An Analysis of 1,914 Patients Treated across a Large Healthcare System*

**H. John Cooper, MD,**  
**Andrew D. Olswing, DO,**  
**Zachary P. Berliner, MD,**  
**Giles R. Scuderi, MD,**  
**Zenobia Brown, MD,**  
**Jose A. Rodriguez, MD,**  
**Matthew S. Hepinstall, MD**



The first Industry Leadership Forum was held at the 2017 AAHKS Annual Meeting.

# 2018 HEALTH POLICY FORECAST

by the AAHKS advocacy firm, Epstein Becker & Green, P.C.

## U.S. Department of Health and Human Services

Following the resignation of Dr. Tom Price as Secretary of Health and Human Services (HHS), the President nominated Alex Azar, most recently an executive at Eli Lilly, to be the new Secretary of HHS. Azar earlier served as Deputy Secretary and General Counsel of HHS during the George W. Bush administration. He is expected to be confirmed by the Senate in late January or February.

During his confirmation hearings, Azar listed four priorities for HHS: (1) addressing high prescription drug prices, (2) making health care coverage more affordable and accessible, (3) moving Medicare towards reimbursing for value, and (4) addressing the opioid crisis.

While he lacks Dr. Price's personal experience as a physician, Azar can be expected generally to follow his predecessor's provider-friendly orientation to Medicare reform and innovation, including skepticism of pushing major reforms on providers too quickly.

## MIPS Implementation

Under the Merit-based Incentive Payment System (MIPS), Medicare physician reimbursement will be adjusted beginning in 2019 based on physician performance measured in 2017 and beyond. Policy makers will evaluate the impact in 2018 of the decision by the Centers for Medicare & Medicaid Services (CMS) to exempt certain small practices from MIPS and to allow other small practices to "pick their pace" of transition into MIPS.

The Medicare Payment Advisory Commission (MedPAC) has already recommended that Congress repeal and replace MIPS, which MedPAC considers to be "inequitable, burdensome and will not improve care for beneficiaries." In late 2018, CMS may begin to project the impact of anticipated reimbursement adjustments in 2019 and assess whether MIPS is having its intended effect on improving efficiency, quality and value.

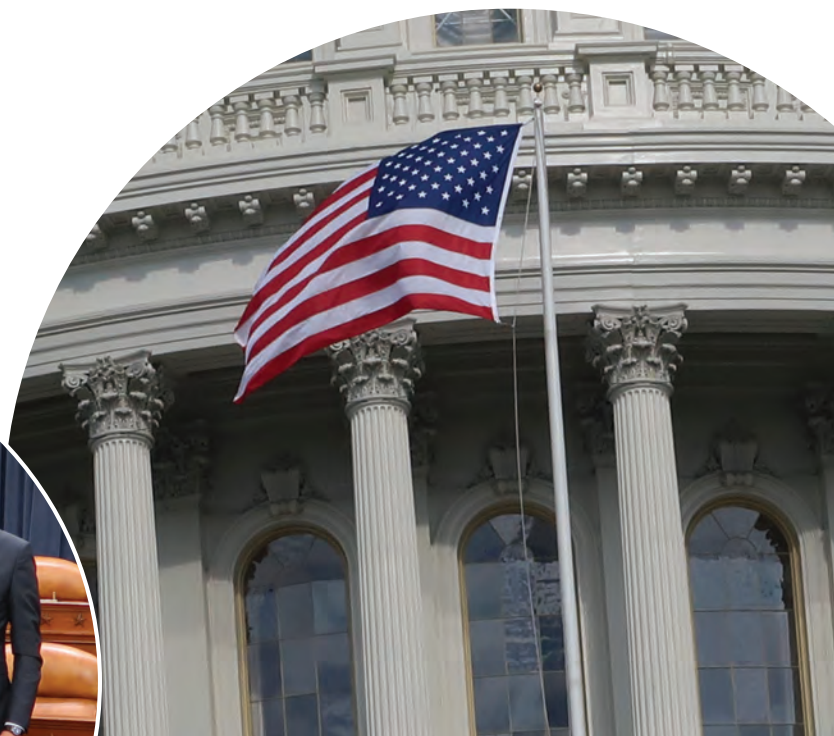
## CMMI and Advanced APMs

After significantly reducing the mandatory scope of the Comprehensive Joint Replacement and Recovery model (CJR), all eyes will be on new leadership at the Center for Medicare & Medicaid Innovation (CMMI) and HHS to see to what degree they will make new Advanced Alternative Payment Models (APMs) available to physicians. Recall that physicians may be exempted from MIPS adjustments and may receive a bonus payment for participating in CMS-approved Advanced APMs.

CMMI solicited public and stakeholder comment for "new directions" it may take in 2018 to test innovative and novel means to deliver and finance health care. Adam Boehler, CEO of Landmark Health, a home-based care company, with experience in private equity backed health care, has been mentioned as the likely next director of CMMI to replace Patrick Conway who departed in 2017 to run BlueCross BlueShield of North Carolina.

It is noteworthy that during his confirmation hearing before the Senate Finance Committee, HHS Secretary-nominee Alex Azar said the following regarding Medicare payment models, "If, to test a hypothesis around changing our health care system, it needs to be mandatory as opposed to voluntary to get adequate data, then so be it." This view represents a departure from that of Dr. Price, who opposed mandatory models.

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# AAHKS

## 2017 ANNUAL MEETING

November 2-5 | Dallas, Texas



*US Senator John Barrasso, MD (R-WY) addresses the Annual Meeting Attendees*



*The general session included Q&A after each symposium.*



*JOA elite reviewers meet for an editorial update.*



*Four leaders of organized medicine presented the keynote program.*



*The Colombian Orthopaedic and Traumatology Society and the European Hip Society AAHKS recognized as the 2017 Guest Societies*



*Members of SCCOT arrived from Colombia*



# PHOTO GALLERY



*Dr. Froimson and Dr. Schaffer thanked industry partners.*



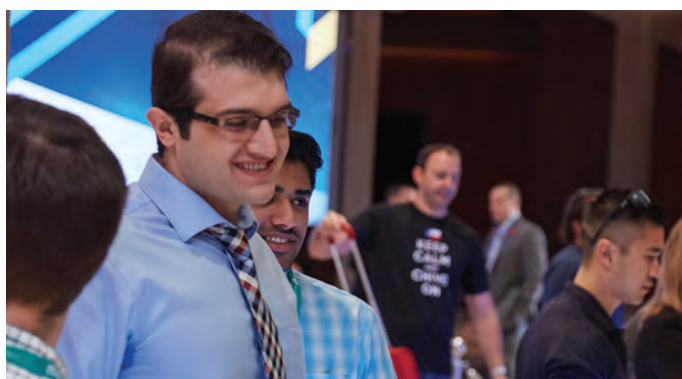
*The Young Arthroplasty Group formed and met for the first time.*



*Colleagues reconnect in the Exhibit Hall/Learning Center*



*Runners start the Orthos on the Move 5K Fun Run and Walk*



*More than 3,000 attendees participated in the 2017 AAHKS Annual Meeting.*

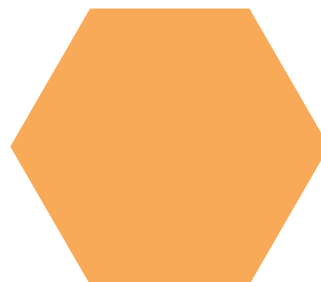


*The first meeting of the Women in Arthroplasty Group took place.*

# JOIN EXPERT PEERS IN MIAMI FOR THE 2018 AAHKS SPRING MEETING

## AAHKS 2018 SPRING MEETING

MAY 4 – 5, 2018 • MIAMI, FLORIDA, USA



### What Colleagues are Saying

*“Wonderful meeting. A rare opportunity to converse with the top experts in our field in a close and collegial manner. This is an excellent format for learning.”*

*“Nice interactive format makes this conference very productive. Faculty were genuinely dedicated to helping us learn.”*

AAHKS invites you to join colleagues for a weekend of intense learning at the 2018 AAHKS Spring Meeting, May 4–5 at The Intercontinental Miami. Attendees can leverage the Instructional Course Lectures (ICL) format which is successful largely due to the expertise they bring and the collaboration among peers in a small group setting.

### Spring Meeting Objectives

- Analyze total hip and knee arthroplasty cases
- Investigate the patterns contributing to effective total hip and knee arthroplasty and revision
- Determine the strategies contributing to optimal perioperative and post-operative care, including complication management
- Consider effective practice management tips and related healthcare policy
- Report the highlights of the 2017 Annual Meeting

### CME



The American Association of Hip and Knee Surgeons (AAHKS) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The American Association of Hip and Knee Surgeons (AAHKS) designates this live activity for a maximum of 15.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### Registration and Hotel

- Meeting attendance is limited to 200, so register now at [www.AAHKS.org](http://www.AAHKS.org).
- To reserve a hotel room, please log in to your AAHKS account and go to *Meeting Registration* to access the hotel website. The Intercontinental Miami is located in the heart of the Arts, Culture, and Entertainment district.

WE LOOK FORWARD  
TO SEEING YOU IN  
MIAMI!

# 2018 AAHKS SPRING MEETING PRELIMINARY AGENDA

Thursday, May 3, 2018

6:00 p.m.

**Welcome**

Friday, May 4, 2018

7:00 a.m.

**Breakfast and “Ask the Experts”**

7:50 a.m.

**Welcome and Introduction**

8:00–8:30 a.m.

**Highlights of the 2017 Annual Meeting**

8:30–9:50 a.m.

**Breakout 1**

10:00–11:00 a.m.

**Symposium I**

11:00 a.m.–12:20 p.m.

**Breakout 2**

12:20–1:00 p.m.

**Lunch**

1:00–2:00 p.m.

**Symposium II**

2:20–3:40 p.m.

**Breakout 3**

3:40–4:50 p.m.

**Symposium III**

Saturday, May 5, 2018

7:00 a.m.

**Breakfast and “Ask the Experts”**

7:50 a.m.

**Welcome and Introduction**

8:00–8:30 a.m.

**Highlights of The Hip Society and The Knee Society closed meetings**

8:30–9:50 a.m.

**Breakout 4**

10:00–11:00 a.m.

**Symposium IV**

11:00 a.m.–12:20 p.m.

**Breakout 5**

12:20–1:00 p.m.

**Lunch**

1:00–2:00 p.m.

**Symposium V**

2:20–3:40 p.m.

**Breakout 6**

3:40–4:50 p.m.

**Symposium VI**

5:00 p.m.

**Adjourn**

## SPRING MEETING FACULTY

Matthew P. Abdel, MD

Matthew S. Austin, MD

C. Lowry Barnes, MD

William P. Barrett, MD

Daniel J. Berry, MD

Stefano A. Bini, MD

Michael P. Bolognesi, MD

Kevin J. Bozic, MD, MBA

David F. Dalury, MD

Craig J. Della Valle, MD

Steven T. Duncan, MD

Thomas K. Fehring, MD

Mark I. Froimson, MD, MBA

George J. Haidukewych, MD

William G. Hamilton, MD

James I. Huddleston, MD

William A. Jiranek, MD, FACS

Carlos J. Lavernia, MD

Jay R. Lieberman, MD

Adolph V. Lombardi Jr., MD

Steven J. MacDonald, MD, FRCSC

R. Michael Meneghini, MD

John M. Morton, MD

Joseph T. Moskal, MD

Mark W. Pagnano, MD

Brian S. Parsley, MD

Javad Parvizi, MD, FRCS

Preetesh D. Patel, MD

Christopher L. Peters, MD

Gregory G. Polkowski II, MD, MSc

Raul Rosenthal, MD

Jonathan L. Schaffer, MD, MBA

Scott M. Sporer, MD, MS

Bryan D. Springer, MD

Garen D. Steele, MD

Juan C. Suarez, MD

Samuel S. Wellman, MD

Adolph J. Yates Jr., MD





## MEET THE 2018 HEALTH POLICY FELLOWS



### **Stephen M. Engstrom, MD**

completed his residency training at Vanderbilt University Medical Center in Nashville and is a current Fellow in Joint Preservation, Resurfacing, and Replacement at Washington University in St. Louis. He is a graduate of the University of Connecticut School of Medicine and completed his undergraduate training at Boston College in Chestnut Hill, Mass. Prior to college, he attended Choate Rosemary Hall in Wallingford, Conn. After fellowship, Dr. Engstrom will be returning to Vanderbilt to begin his clinical practice.



**Vasili Karas, MD** is currently an Adult Reconstruction Fellow at Rush University Medical Center. He earned his Bachelor's degree in Business and Biological Sciences from the University of Notre Dame. Dr. Karas graduated from Rush Medical College in Chicago with a medical degree as well as a Master's in Science, Anatomy and Cellular Biology through a training grant funded through the National Institutes of Health. He completed his orthopaedic training at Duke University Medical Center in Durham, North Carolina. During his tenure at Duke, Dr. Karas fostered an interest in alternative payment models as well as value-based medicine and continues to build on these interests.



**Linda I. Suleiman, MD** is currently an Adult Hip and Knee Reconstruction Fellow at Rush University Medical Center. She earned her undergraduate Bachelor of Science degree in Physiology and Neurobiology at the University of Maryland. Dr. Suleiman graduated from Howard University College of Medicine where she served as a member on the Health Policy Board. She went on to complete her orthopaedic surgery residency at Northwestern University. During her time there, she developed an interest in advocacy both through leadership and research, serving as the resident member on the Graduate Medical Education Committee. Dr. Suleiman's research interests lie in risk stratification and health disparities. She looks forward to joining the faculty of Northwestern University Feinberg School of Medicine in the fall of 2018 as an assistant professor in the Department of Orthopaedic Surgery.

## CHECK OUT THE SPECIALTY DAY PRELIMINARY PROGRAM

Specialty Day takes place at the American Academy of Orthopaedic Surgeons' (AAOS) Annual Meeting on Saturday, March 10, 2018. Co-sponsored by AAHKS, AAOS, The Hip Society and The Knee Society, two programs take place concurrently in adjacent rooms so attendees can move easily between them.

View the preliminary program and register at [www.aaos.org/register](http://www.aaos.org/register).

## 2018 HEALTH POLICY FORECAST (CONT.)

### Medicare Reimbursement and Compliance

CMS and the new administration spent the 2017 regulatory cycle inviting health care stakeholders to submit proposals and suggestions for Medicare regulatory reform. Any proposals that have been accepted will be announced in 2018 for implementation in 2019. Physicians, hospitals, post-acute care providers, Medicare Advantage plans, and others should anticipate a higher-volume of substantive regulatory changes in 2018 than in recent years.

Other possible changes may include CMS continuing its trend of removing joint replacement procedures from the inpatient only list by allowing reimbursement of total hip replacements in outpatient departments or ambulatory surgery centers.

### Medicaid Administrative Reforms

Congressional Republicans failed to pass their proposed financing and structural reforms to the Medicaid program. It should be expected instead that CMS will utilize its waiver authority to offer states greater flexibility in fulfilling Medicaid obligations in order to achieve some of the policies intended by Congressional Republicans.

### ACA “Repeal and Replace” or ACA Stabilization?

Having repealed the ACA individual mandate at the end of 2017, Congress may now attempt to stabilize the ACA Marketplaces through the Alexander-Murray bill (two years of cost-sharing reduction funding, allowing more ACA waivers, supporting enrollment outreach and marketing, and allowing some lower premium catastrophic coverage plans), or the Collins-Nelson bill (\$10 billion over two years to support state efforts to develop reinsurance programs or invisible high risk pools). However, Congressional debate on this topic may not move beyond partisan slogans in an attempt to position for a more serious legislative push in 2019 based on which party controls Congress following the mid-term elections.

### Prescription Drug Prices

The escalating prices of certain pharmaceuticals will continue to be a high-profile issue, particularly in a mid-term election year, but meaningful action by Congress is unlikely even though political rhetoric will be fierce. Democrats are more likely to target drug manufacturers, while Republicans are more likely to focus on pharmacy benefit managers and other opaque supply chain issues as the source of rising prices.

### Opioid Abuse Crisis

Congress, the White House, and HHS continue to evaluate potential responses to the present opioid addiction crisis. Each is evaluating numerous policy interventions to determine which, if any, would have a marked impact on opioid abuse. Potential strategies include easing availability of opioid alternatives, removing unnecessary incentives for opioid prescribing and/or requiring training for such prescribing, drug monitoring databases, establishing more drug courts and mental health courts in the criminal justice system, increased penalties for traffickers, and increased funding for interventions.

### Health Care Litigation with the States

Look for several health care policy debates to play out, not in Congressional debate, but in litigation between the Administration or Congress and some State Attorney Generals. Continued and new topics of litigation include ACA cost-sharing reduction subsidies, medical marijuana and decriminalization, and mandated contraceptive coverage.



## INVITATION TO PARTICIPATE IN FARE GRANT STUDIES

The 2017 Foundation for Arthroplasty Research and Education (FARE) grant recipients, Thorsten M. Seyler, MD, PhD of Duke University, and Noam Shohat, MD of the Rothman Institute are inviting participation in their respective studies.

Dr. Seyler is conducting a prospective, randomized study, "Perioperative Antibiotic Prophylaxis in Patients Undergoing Elective Total Knee Arthroplasty." The study's goal is to establish level I evidence for single-dose versus 24-hour antibiotic prophylaxis in primary total knee arthroplasty and is based on the most recent release of the Centers for Medicare & Medicaid Service's guideline for perioperative antibiotics, which is based on limited evidence.

This study requires 90-day follow-up, and data is collected through RedCap. Duke University can act as the central institutional review board (IRB) for interested sites as needed.


Dr. Shohat's study, "Fructosamine as a Predictor of Surgical Outcomes in Total Joint Arthroplasty," aims to validate preliminary findings in a recent study conducted at the Rothman Institute. Patients were screened prior to TJA for HbA1c and fructosamine. The overall prevalence of diabetes in the cohort was 20% (40% were undiagnosed) and another 37.1% had pre-diabetes. The study showed that fructosamine is highly associated with PJI and may supersede HbA1c in the preoperative assessment, with better performance and more rapid normalization in response to treatment.

FARE is coordinating a multi-institutional study aimed at validating these preliminary findings in a large cohort. We also hope to ascertain a possible threshold of fructosamine associated with increased risk for PJI. A few sites have already obtained IRB approval and are collecting samples routinely as part of their standard of care. We feel fructosamine measurement has the potential to impact patient care, but we require your assistance in validating this marker further.

If you are interested in collaborating with one or both of these studies, please contact Chiara Rodgers, MPH, CCRC, Research Manager at [crodders@aahks.org](mailto:crodders@aahks.org).

## SHARE NEW AAHKS PATIENT EDUCATION RESOURCES!

**Living with a New Joint**  
If you've had a hip or knee replaced, you may have some questions about day-to-day activities.



**Help, I can't sleep!**  
One of the most frequent complaints after total joint replacement is difficulty sleeping. Your sleep disruption is likely caused by pain. Learn how to get a good night's sleep after surgery.

**Will I set off airport metal detectors?**  
Many commonly used orthopaedic implants may set off metal detectors at airport security. In fact, over 90% of implants will. Learn how to discreetly inform TSA of your implants.

**Do I need antibiotics for teeth cleaning?**  
During a dental procedure, it is possible for bacteria from the mouth, teeth or gums to travel through the bloodstream and settle in an artificial joint. Learn about the current protocol for antibiotics prior to your visit.

**Can I play sports after knee replacement?**  
The forces applied to a knee implant are much higher while playing sports than during regular daily activities. This can cause wear and tear on the implants. Learn what you can and can't do with your new knee.

AAHKS has launched a new website for patients that gives them a centralized, credible source for hip and knee replacement surgery information. The new site represents a collaboration between the Patient and Public Relations Committee, Web and Social Media Committee and Evidence Based Medicine Committee. Peer reviewed articles and videos are available now in an attractive format that is easy to navigate. Content is reviewed annually, and more will be added in the coming year. Suggestions for additional content or links to good external resources are always welcome.

Please share this new site with your patients by linking to it from your practice, institution and social media sites <http://hipknee.aahks.org>.



# AJRR Data can be a Patient Outcomes Game Changer



The American Joint Replacement Registry — the Official Registry of AAHKS — tracks more than one million hip and knee replacement procedures through nearly 1,000 participating institutions and nearly 8,800 surgeons.

The data we collect and analyze can be a game changer, improving patient outcomes and the quality of orthopaedic care. Here's how:

- **Better informed decision-making.** Using AJRR metrics improves patient follow up and intervention, and reduces complications and revision rates.
- **National performance benchmarks.** Comparing your results to similar practices across the country supports quality improvement and best practices.
- **The patient perspective.** The Registry's patient-reported outcomes module helps you monitor actions that improve patient care and recovery.

Learn more about how your patients can benefit when you join the Registry.

Visit our website at [AJRR.net](http://AJRR.net) to download a free copy of the AJRR 2017 Annual Report.



**AJRR** American  
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American Association of Hip and Knee Surgeons

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