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COA Report

California Orthopaedic Association

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Attend COA's 2020 Annual Meeting to Learn About 2020 Medicare Changes and Appropriate Use Criteria for Advanced Diagnostic Imaging and When it Will be Mandatory



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Pete Stark, fiery California congressman and advocate of universal health care, dies at 88



The Washington Post

Fortney H. "Pete" Stark Jr., an outspoken California Democrat who, during his 40 years in the House of Representative, led efforts to expand health insurance but whose brash comments sometimes earned rebukes from colleagues and political opponents, died Jan. 24 at his home in Harwood, Md. He was 88. [READ MORE](#)

Medicare to Cover Acupuncture for Chronic Low Back Pain



CMS

The Centers for Medicare and Medicaid Services (CMS) recently finalized a decision to cover acupuncture treatment for chronic low back pain (CLBP). In its announcement, the agency defines CLBP as nonspecific pain that is not associated with surgery or pregnancy and lasts for at least 12 weeks. CMS also stipulates that acupuncture will be covered for up to 20 treatments per year and must be administered by either a physician, physician assistant, or nurse practitioner who has a graduate-level degree in acupuncture or Oriental Medicine from a school accredited by the Accreditation Commission on Acupuncture and Oriental Medicine, or is supervised auxiliary personnel. AAOS supported the initial proposal, citing acupuncture as a complementary, non-clinical remedy for CLBP in its August 2019 comments. We believe it to be a valuable supplement to traditional orthopaedic practice and appropriate for use as an alternative to pain medication for select

patients. [READ MORE](#)

Study examines effects of CMS' two-midnight rule in TJA



AAOS

To lessen the financial burden of total joint arthroplasty (TJA) and encourage shorter hospital stays, the Centers for Medicare and Medicaid Services (CMS) recently removed TKA from the inpatient-only list. This policy change now requires providers and institutions to apply the two-midnight rule (TMR) to short-stay (1-midnight) inpatient hospitalizations (SSIH). [READ MORE](#)

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Advocacy to Secure Increased PRORP Appropriations



AAOS

AAOS physicians were on Capitol Hill last week advocating for the Peer Reviewed Orthopaedic Research Program (PRORP), which is one of the most successful Congressionally Directed Medical Research Programs housed under the Department of Defense. PRORP is a competitive grant program that funds focused basic and clinical research pertaining to extremity war injuries through direct grants to research institutions. More than 15,000 patients have been enrolled in studies funded by PRORP to date, with results leading to major improvements in surgeons' abilities to care for these devastating injuries. The program was funded at \$30 million for Fiscal Year 2020, and AAOS now seeks \$35 million for Fiscal Year 2021. The additional \$5 million is needed for the consortiums supporting PRORP which received initial startup funding in 2009 and limited supplemental funding since, but must now use funding intended for research programs in order to continue operation. [READ MORE](#)

Coalition Reiterates Surprise Billing Principles Ahead of Vote



AAOS

AAOS joined with a coalition of physician groups in writing a letter to key House committees expressing our principles for surprise billing reform. The letter comes as the House Ways and Means Committee prepares to announce and vote on its version of surprise billing legislation as early as this week. While the details of that proposal are not yet public, the legislation is expected to serve as a counterpoint to earlier proposals from the House Energy and Commerce Committee and the Senate Health, Education, Labor, and Pensions Committee. As a reminder, AAOS opposed those earlier efforts which failed to set up an effective and fair independent dispute resolution process for resolving out-of-network medical bills. AAOS will continue to work with coalition partners and Congress to protect patients from surprise medical bills, address narrow health insurance networks, and maintain a fair playing field for negotiations. [READ MORE](#)

AAOS Warns Against Broadening Scope of Practice



AAOS

On January 17, AAOS submitted feedback to the Centers for Medicare and Medicaid Services (CMS) on its proposal to ease scope of practice restrictions. The agency had requested input and recommendations on carrying out the President's recent executive order to eliminate certain supervision and licensure requirements

that “limit healthcare professionals from practicing at the top of their professional license.” In its comments, AAOS stressed the importance of keeping the title "physician" reserved only for those health care professionals who have completed rigorous training and passed the United States Medical Licensing Exam. AAOS also reiterated support for non-physician providers who work as valued members of physician-led care teams. In addition to offering its own comments, AAOS signed onto the American Medical Association’s feedback letter which cited the impact these changes would have on the overall cost and quality of care. [READ MORE](#)

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