

Healthcare

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CMS Releases Recommendations on Adult Elective Surgeries, Non-Essential Medical, Surgical, and Dental Procedures During COVID-19 Response

At yesterday's White House Coronavirus Task Force Press briefing, the Centers for Medicare & Medicaid Services (CMS) announced recommendations to limit non-essential adult elective surgery and medical and surgical procedures, including all dental procedures, during the 2019 Novel Coronavirus (COVID-19) outbreak. A copy of the recommendations may be found here.

CMS's reasoning for the recommendations was three-fold:

- preserving needed resources (personal protective equipment (PPE), hospital and intensive care unit beds and ventilators and other equipment) for battling the outbreak
- freeing up the healthcare workforce to care for patients who are most in need
- limiting exposure of patients and staff to the SARS-CoV-2 virus (the virus that causes COVID-19) encouraging patients to remain home, unless there is an emergency

The recommendations provide a tiered framework for health systems to implement immediately during the COVID-19 response that is designed to inform health systems as they consider resources and how best to provide surgical services and procedures to those whose condition requires emergent or urgent attention to save lives, preserve organ function and avoid further harm from underlying condition or disease. CMS makes clear that these decisions remain the responsibility of local delivery systems, including state and local health officials, and those surgeons who have direct responsibility to their patients. However, CMS notes that in making the decisions not only must the clinical situation be evaluated but resource conservation must also be considered. The supply of PPE, hospital and intensive care unit beds and ventilators should be considered at all times, even in areas not currently dealing with COVID-19 infections.

Accordingly, noting that these should be used on a case-by-case basis, CMS suggests that hospitals and clinicians consider the following factors as to whether a planned procedure should proceed:

- Current and projected COVID-19 cases in the facility and region. Health systems should consider the
 tiered approach in the table below to curtail elective surgeries and procedures, with the decision made
 in consultation with the hospital, surgeon, patient, and other public health professionals.
- Supply of PPE to the facilities in the system
- Staffing availability
- Bed availability, especially intensive care unit beds
- Ventilator availability
- Health and age of the patient, especially given the risks of concurrent COVID-19 infection during recovery
- Urgency of the procedure

<u>Tiers</u>	<u>Action</u>	<u>Definition</u>	Locations	<u>Examples</u>
1A	Postpone surgery/ procedure	Low acuity surgery/healthy patient: Outpatient surgery, not life threatening illness	-HOPD -ASC -Hospital with low/no COVID-19 census	-Carpal tunnel release -EGD -Colonoscopy -Cataracts
1B	Postpone surgery/ procedure	Low acuity surgery/unhealthy patient	-HOPD -ASC -Hospital with low/no COVID-19 census	-Endoscopies
2A	Consider postponing surgery/procedure	Intermediate acuity surgery/healthy patient: Not life threatening but potential for future morbidity and mortality. Requires in-hospital stay	-HOPD -ASC -Hospital with low/no COVID-19 Census	-Low risk cancer -Non urgent spine & Ortho: Including hip, knee replacement and elective spine surgery -Stable ureteral colic -Elective angioplasty
2B	Postpone surgery/ procedure if possible	Intermediate acuity surgery/unhealthy patient	-HOPD -ASC -Hospital with low/no COVID-19 census	
3A	Do not postpone	High acuity surgery/healthy patient	Hospital	-Most cancers -Neurosurgery -Highly symptomatic patients
3В	Do not postpone	High acuity surgery/healthy patient	Hospital	-Transplants -Trauma -Cardiac with symptoms -Limb threatening vascular surgery

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We anticipate that additional guidance in response to COVID-19 will be issued in the coming days and weeks, which may include additional waivers or modifications. Covered health care providers who are or may be affected by the consequences of the COVID-19 pandemic should monitor additional developments and announcements from the United States Department of Health and Human Services, CMS, the Office for Civil Rights, and various other federal and state agencies. If you have any questions about the impact of COVID-

19 on health care providers or the Elective procedure recommendations issued by CMS, please contact a member of our <u>national Healthcare team</u>.

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