

1. Returning to elective surgery requires patients to have access to physical therapy, and in many cases that means virtual therapy sessions. CMS expanded its list of telehealth services covered for virtual visits to include physical therapy for Medicare beneficiaries last week.

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2. Spine surgeons across the nation are planning to resume their procedures and figure out how to update their backlog of cases. There are several considerations based on national, state and local guidance; however, as COVID-19 tests become available, surgeons will be able to accelerate their case load.

"Pending testing capacity, it is our intent to do COVID-19 testing on all elective patients, followed by a 48hour self-quarantine between testing and the day of surgery," said Alexander Vaccaro, MD, PhD, president of Philadelphia-based Rothman Institute. "Initially we expect to start at 50 percent of a surgeon's typical daily elective caseload to allow for more extensive room cleaning between cases. Our priority initially will be to reassure patients that we can safely address their care needs. As we develop that confidence and trust with our patients, employees and physicians, we will accelerate the ramp-up."

3. Texas Back Institute in Plano has implemented a socially distanced check-in process and screening and PPE strategy for patients and staff to ensure a safe return to clinic visits and surgeries. The practice will also tailor clinic schedules to include both face-to-face and telemedicine encounters and are stratifying cases into low-risk and high-risk patients based on their susceptibility to COVID-19.

4. Device companies are beginning to report first quarter earnings, with significant negative impact from the pandemic.

• Stryker reported overall net sales were up 2 percent in the quarter, but could not provide updated guidance for the year. Stryker's orthopedic sales dropped 2.1 percent in the quarter although neurotechnology and spine sales were up slightly to \$700 million.

• Zimmer Biomet is expected to report a 10 percent revenue drop next week, and the company's spine and craniomaxillofacial sales had already been slowing in recent quarters.

• Johnson & Jonson's spine, sports and other sales were down 10.7 percent in the first quarter to \$702 million.

5. The "new normal" for spine surgeons is hard to define, but over the next 12 to 18 months surgeons are p reparing to initially resume surgical cases and hit a balance between telehealth and in-clinic visits going forward. However, another surge in COVID-19 patients later this year could affect practices and some are preparing for a drop in surgical case volume because some patients will be uncomfortable having surgery until there is a COVID-19 vaccine.

6. Spine surgeons also may see payers push for alternative or at-risk payer models to shift the cost burden to providers and link reimbursement to sustained performance. "In order to perform well, physician practices should be prepared to quickly engage in robust data tracking and reporting capabilities, the ability to demonstrate consistent clinical outcomes and be able to function in a population health type environment where a larger continuum of the patient's care than just the surgical episode is the responsibility of the surgeon," said Jason Scalise, MD, of Phoenix-based The CORE Institute. "Practices without the ability to do so quickly should look for partnerships that allow them to incorporate such resources."

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