

### **ACCOMPLISHMENTS**

#### **90 Day Global Period Eliminated for Skin Substitutes**

- Through advocacy, constant discussion with CMS and submitting comments on physicians' fee schedule, the Alliance worked with CMS so as to eliminate the 90 day global period for skin substitutes. All skin substitutes now have a 0 day global period.

#### **Alliance of Wound Care Stakeholders is a 501 C 6 trade association**

- Following recommendations from both the Alliance and after years of discussion to formalize it, the Alliance of Wound Care Stakeholders was established as a 501 c 6 trade association.

#### **Alliance of Wound Care Stakeholders' Wound Care Research Manuscript Accepted for Publication**

- The Alliance created a multidisciplinary expert panel (Panel On Wound Care Evidence-based Research - POWER™) in wound care research from its participating organizations to define a set of principles to provide direction to all stakeholders involved in clinical or comparative effectiveness research in wound healing. A modified Delphi approach was used to help reach consensus on the principles. A manuscript was generated that has been accepted for publication in 2012 in the peer reviewed publication Wound Repair and Regeneration.

#### **Awareness of POWER™ Wound Care Principles**

- The Alliance POWER™ presented posters at 15 clinical association conferences/symposiums and has garnered awareness within the clinical community for their wound care research principles.

## Wound Care Quality Measures on the CMS Docket

- **CMS**
  - **May**- Hospital Inpatient Prospective Payment System re: pressure ulcer classification
  - **Sept**-Physicians Fee Schedule re: quality measures, and DME face-to-face consultation
  - **Dec**- Physicians Fee Schedule final rule re: G codes for NPWT
  
- **ARHQ**
  - Serves on Technical Expert Panel and submitted two sets of comments on "Prioritization of Future Research Needs for Chronic Venous Ulcers"

**ACTIVITIES** (Comments can be found at: <http://woundcarestakeholders.org/activities-a-accomplishments/official-comments> )

## Comments Submitted to Federal Agencies and Their Contractors

- **April**- Submitted to CMS "Draft Negative Pressure Wound Therapy Quality Standards for Suppliers" to be used in the second round of competitive bidding
- **June**- Submitted comments to CMS on proposed rule on Accountable Care Organizations
- **July**-
  - Submitted comments to AHRQ on "Engage Stakeholders to Identify and Prioritize Future Research Needs
  - Submitted comments to AHRQ on "Methods Guide for Effectiveness and Comparative Effectiveness Review: Avoiding Bias in Selecting Studies"
- **August**- Submitted comments to CMS on Physicians fee schedule
- **August/September**-
  - Spoke at DMEMAC public meeting regarding Pneumatic compression draft LCD

- Submitted comments to DMEMAC medical directors on two draft LCDs: pneumatic compression and suction pumps
- **October-** Submitted the following wound care quality measures to CMS:
  - Support surface or offloading of patients with stage III/IV pressure ulcers
  - Offloading status for patients with DFU
  - Vascular testing of patients with leg ulcers
  - Venous compression each visit of patients with venous stasis ulcers
- **October-** Submit comments to AHRQ on venous stasis ulcer comparative effectiveness review
- **November-** Sent letter to National Correct Coding Initiative requesting changes in current billing edits to ensure appropriate wound care delivery.

### **Legislative Activity/Letter Submitted to Members of Congress**

- **October-** Sent letter to Committees of Jurisdiction regarding the need for CMS to use NPWT quality standards for suppliers in competitive bidding
- **December-** Alliance alerted Members to contact Members of Congress to oppose cutting hospital payments for evaluation and management visits to pay for the fix to the physician payment system.

### **Panel On Wound Care Evidence-based Research (POWER™)**

- The Alliance created a multidisciplinary expert panel (Panel On Wound Care Evidence-based Research - POWER™) in wound care research from its participating organizations to define a set of principles to provide direction to all stakeholders involved in clinical or comparative effectiveness research in wound healing. A modified Delphi approach was used to help reach consensus on the principles. A manuscript has been generated that has been accepted for publication in Wound Repair and Regeneration. The Alliance has presented a clinical poster on this study at 15 wound care and medical specialty society meetings in 2011.

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