July 26, 2018

Physician-Focused Payment Model Technical Advisory Committee c/o US DHHS Asst. Secretary of Planning and Evaluation Office of Health Policy 200 Independence Ave., SW Washington DC 20201

PTAC@hhs.gov

Letter of Intent

Re: Bundled Payment for Outpatient Wound Care Services in Non Hospital Based Setting

To: Physician Focused Payment Model Advisory Committee

Dear Committee Members,

Seha Medical and Wound Care is pleased to present an innovative model for out-patient wound care services in non-hospital based setting. The proposed model of bundled payments per visit will result in significant savings to medicare and shift focus from procedure oriented care to a patient focused model.

This model will also be a big relief to medicare beneficiaries who do not have a secondary insurance and are on limited income as retirees. This is because charges from hospitals for services in addition to basic wound care can lead to a large portion of a patient's financial liability. This can lead to poor compliance with follow up, delayed healing and even hospitalization due to infections adding to total cost for both patient and medicare.

The proposed model incorporates shared risk and other PFPM requirements.

Goal of the Model

The goal of the bundled payment model for outpatient wound care services is to provide high quality wound care in outpatient non hospital based setting. SMWC has been providing wound care to mainly medicare beneficiaries with chronic wounds in a non-hospital based setting for the last over 14 years and has an excellent track record of saving costs, very high patient satisfaction and excellent outcomes.

Expected Participants

Patients with chronic wounds will have more choice to seek care with a qualified provider instead of just the hospital based wound clinics.

Eligible providers with experience and interest in wound care will be able to join the model thereby expanding the pool of physicians available in the specialty of wound care.

The proposed initial non hospital wound clinic will be the current SMWC free standing outpatient wound clinic. This provider and SMWC are well known in the area. Other providers with interest in wound care will have the option to be included if adopt the requirements of the model.

Implementation Strategy

The plan will be ready to implement as soon as the administrative requirements are established by the payers. The initial deployment will be at SMWC and its provider. As the program is initiated and implemented it will encourage other providers to meet the model requirements and join in.

A new episode will be defined as new onset of an ulcer (traumatic, venous, diabetic, surgical, non healing) when a patient presents for initial visit.

Sincerely,

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