

CMS DELAYS RADIATION ONCOLOGY (RO) MODEL INDEFINITELY

The Centers for Medicare and Medicaid Services (CMS) has issued a proposed rule that would delay the Radiation Oncology (RO) Model's start date and performance period until a yet-to-be-determined time.

The controversial demonstration would provide bundled payments for a 90-day episode of care to certain radiotherapy providers and suppliers furnishing radiotherapy for: anal cancer, bladder cancer, bone metastases, brain metastases, breast cancer, cervical cancer, CNS tumors, colorectal cancer, head and neck cancer, lung cancer, lymphoma, pancreatic cancer, prostate cancer, upper gastrointestinal cancer and uterine cancer. Providers in randomly selected locations across the country would participate in the mandatory model.

Despite pushback from providers, the Biden administration hasn't made changes to how the demonstration would be set up. AAPM, among other advocates, have raised concerns with the model's mandatory nature and severe discounts, arguing they could negatively impact patient care.

Providers have specifically asked CMS to limit discounts to 3% or less, but CMS insists it's impossible to reduce the discounts beyond 3.5% for participating group practices and less than 4.5% for hospital outpatient departments without expanding where in the country the model takes effect.

"If the discount amounts are significantly smaller, all else equal, the projected savings will be smaller, and therefore, the number of CBSAs (and episodes) in the participant group may not be sufficient for CMS to detect an effect of the RO Model with statistical confidence," CMS says.

"CMS states that given that there have been two legislative delays of the RO Model, the operational resources required of CMS and RO participants to continue to prepare for the RO Model before it can be implemented, and some stakeholders' comments that they would not support the RO Model unless specific changes were made, we are proposing to delay the start of the RO Model to a date to be determined through future rulemaking and to modify the definition of model performance period to reflect this policy. We would plan to propose a start date through rulemaking and modify the definition of model performance period to reflect this proposed start date no less than 6 months prior to that proposed start date."

CMS states, "those entities selected to be RO participants continue to make good faith efforts to prepare to implement the RO Model, which may involve financial, operational, and administrative investment and resources. Given multiple delays and uncertainty about the timing of the RO Model, delaying the RO Model indefinitely will give RO participants the ability to pause their efforts to prepare for implementation of the RO Model. We welcome additional dialogue with RO participants and stakeholders about Medicare payment for RT services."

CMS is soliciting comments on the proposed delay of the RO Model. AAPM will submit written comments to CMS this month supporting the delay until the RO Model can be appropriately modified to ensure health equity and high-quality cancer care.