

Modern
Healthcare



MENU ≡

Home > Providers

March 18, 2020 10:07 PM

CMS releases elective surgery recommendations for COVID-19 fight

MICHAEL BRADY  



TWEET



SHARE



SHARE



EMAIL



The CMS on Wednesday announced that elective surgeries and non-essential medical and surgical procedures should be delayed until the **COVID-19 pandemic** ends.

The agency recommended that providers and public officials consider a wide range of factors when deciding whether to postpone a surgery or procedure, including patient risk factors, bed availability, staffing and personal protective equipment supplies.

"We need to preserve personal protective equipment for those on the front lines of this fight," said CMS Administrator Seema Verma.



DELOITTE

Six imperatives for chief strategy officers in health care

As the health care industry moves into a future dominated by consumer change, emerging technologies, and evolving regulation, the strategic imperatives outlined below will play a pivotal role in navigating stormy waters.

[Read More](#)

The guidance should help providers and state and local officials preserve their supplies in the fight against COVID-19.

"As hospitals and physician practices plan for anticipated surges of patients needing care for COVID-19 infections, health professionals must use their expertise to develop allocation policies that are fair and safeguard the welfare of patients," Dr. Patrice Harris, president of the American Medical Association in a statement.

Medical supply chains have been tested by the coronavirus outbreak in recent weeks, leading to a shortage of such critical items as N95 masks. The Trump administration has taken a series of measures to address the problem in recent days, [even invoking wartime powers to increase U.S. production of medical supplies](#).

*Letter
— to the —
Editor*

Send us a letter

Have an opinion about this story? [Click here to submit a Letter to the Editor](#), and we may publish it in print.

RECOMMENDED FOR YOU



Walmart teams up with primary-care network Oak Street Health



Sinai Health and DePaul team up to address health inequity



Sponsored Content: Smart health commi
the future of health Five core component
and government stakeholders can consi
shift to health and well-being

SPONSORED CONTENT

Healthcare Consumer Experience: Inside a New Reality



COVID-19 is forcing
 leaders to reimagine
 patient interactions to
 ensure brand loyalty and

improve the bottom line.

[Download](#)

Could cost savings be hiding in plain sight?



For hospitals seeking to reduce costs and improve margins, these strategies and best practices may point to significant savings opportunities throughout the organization.

[Read More](#)

Labor Costs and Quality of Care: A Balancing Act



Craig Ahrens of CareRev discusses how technology can help healthcare systems reduce labor costs without sacrificing quality.

[Read More](#)

SUBSCRIBE TODAY

The weekly magazine, websites, research and databases provide a powerful and all-encompassing industry presence. We help you make informed business decisions and lead your organizations to success.

SUBSCRIBE

CONNECT WITH US



Stay Connected

Join the conversation with Modern Healthcare through our social media pages

Modern Healthcare

CONTACT US

(877) 812-1581

Email us

RESOURCES

Contact Us

Ad Choices 

Advertise with Us

Sitemap

EDITORIAL DEPT

[Submission Guidelines](#)

[Code of Ethics](#)

[Awards](#)

[About Us](#)

LEGAL

[Terms and Conditions](#)

[Privacy Policy](#)

[Privacy Request](#)

CRAIN

Copyright © 1996-2020. Crain Communications, Inc. All Rights Reserved.

[4 Comments](#)[Modern Healthcare](#)[Privacy Policy](#)[Login](#)[Recommend](#)[Tweet](#)[Share](#)[Sort by Best](#)

LOG IN WITH

OR SIGN UP WITH DISQUS [?](#)**The SETT Group** • 6 months ago

Silly stuff. The only entity that should be making protocol for any surgeries are the surgeons--specially, the American College of Surgeons. All others should but out, especially the AMA.

[^](#) | [v](#) • [Reply](#) • [Share](#)**Dee** [➔](#) The SETT Group • 5 months ago

The ACS did recommend postponing or cancelling all elective cases.

<https://www.facs.org/media/...>

[^](#) | [v](#) • [Reply](#) • [Share](#)**Eileen** • 6 months ago

Huh? Government bureaucrats deciding surgical policy? Is this the future? Where is the surgical leadership on this? These decisions should be local regional and based upon cases of COVID19, resources and preparedness. It should be made by surgeons, their chief and the hospital or surgery center. If the local situation changes then the local policy should reflect that There is no reason to shut down all elective cases especially in a hospital area with low to no current COVID19 cases. Lets get a balance between panic and scaled response.

[^](#) | [v](#) • [Reply](#) • [Share](#)

GET FREE NEWSLETTERS

Sign up for free enewsletters and alerts to receive breaking news and in-depth coverage of healthcare events and trends, as they happen, right to your inbox.

Email Address

[SIGN UP](#)