

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Mariana

2. Surname (Last Name)  
Socal

3. Date  
20-August-2019

4. Are you the corresponding author? ☐ Yes ☒ No  
Corresponding Author's Name  
Casey Jo Hymbyrd

5. Manuscript Title  
Patient Selection after Mandatory Bundled Payments for Hip and Knee Replacement: Is there evidence of lemon-dropping or cherry-picking?

6. Manuscript Identifying Number (if you know it)  
JBJS - D - 19-00756

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Dr. Socal has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Shannon

2. Surname (Last Name)  
Wu

3. Date  
09-September-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Casey Jo Humbyrd

5. Manuscript Title  
Patient Selection after Mandatory Bundled Payments for Hip and Knee Replacement: Is There Evidence of Lemon-Dropping or Cherry-Picking?

6. Manuscript Identifying Number (if you know it)  
JBJS-D-19-00756

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Dr. Wu has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
Antonio

2. Surname (Last Name)  
Trujillo

3. Date  
20-August-2019

4. Are you the corresponding author? ☐ Yes ☒ No Corresponding Author's Name  
Casey Jo Hymbyrd

5. Manuscript Title  
Patient Selection after Mandatory Bundled Payments for Hip and Knee Replacement: Is there evidence of lemon-dropping or cherry-picking?

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Gerard

2. Surname (Last Name)  
Anderson

3. Date  
20-August-2019

4. Are you the corresponding author?

☐ Yes ☒ No

Corresponding Author's Name  
Casey Jo Hymbyrd

5. Manuscript Title  
Patient Selection after Mandatory Bundled Payments for Hip and Knee Replacement: Is there evidence of lemon-dropping or cherry-picking?

6. Manuscript Identifying Number (if you know it)  
JBJS - D - 19-00756

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1. Given Name (First Name)  
Casey

2. Surname (Last Name)  
Humbyrd

3. Date  
27-August-2019

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
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