

Administrative Burden and Delays in Treatment in Patients Undergoing Prior Authorization for Primary Hip and Knee Arthroplasty

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INTRODUCTION: Prior authorization (PA) is commonly requested by Medicare Advantage and commercial insurance plans to evaluate the appropriateness of a requested service. Physicians often criticize the PA process citing extensive administrative work and unnecessary delays in treatment. The effects of PA policies in total hip (THA) and knee (TKA) arthroplasty have not been well studied. The purpose of this study is to analyze the use of PA in our institution.

METHODS:

We reviewed prospectively collected data for a consecutive series of 28,857 primary THA and TKA procedures performed between 2020 and 2023 across four states. Our institution's PA team recorded demographic data, whether the payer approved the procedure, time to approval or denial, number of initial denials, number of peer reviews or addendums, and reasons for denial.

RESULTS: Of the total cohort, 15,959 (55%) patients required PA for surgery, with a mean time to approval of 30.2 ± 38.7 days. There was a request for an addendum in 1,373 (9%) patients to overturn denials (20%) and provide additional clinical information (80%). Of a total of 1,014 initial denials (6%), a peer-to-peer was requested in 114 patients (0.7%), and only 62 (0.4%) denials were upheld after the PA process, with a mean time to denial of 58.2 ± 88.1 days. The most common reasons for denial were unspecified by the payer (38%), poor clinical documentation (19%), lack of coverage (17%), not medically fit (15%), and medical necessity not met (10%).

DISCUSSION AND CONCLUSION:

The use of prior authorization to approve elective THA and TKA leads to delays in surgical waiting times and generates a high administrative burden for surgeons and their staff. With over 99 percent of cases ultimately approved, payers and policymakers should exempt practices with a low denial rate in order to reduce administrative work and allow patients access to timely arthroplasty care.