Assessing Surgical Outcomes in Medicare Patients Undergoing Total Hip Arthroplasty in an Outpatient Surgical Center

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INTRODUCTION: It is established in the literature that Medicare patients carry a higher burden of chronic disease and associated comorbidities compared to the general public and to age matched patients with private insurance. Hence, it has often been presumed that the Medicare population incurs worse surgical outcomes. This study aimed to evaluate the surgical outcomes in Medicare patients undergoing total hip arthroplasty (THA).

METHODS: Data collected from two fellowship trained orthopaedic surgeons practicing at a single free standing ambulatory center was used to identify all patients who underwent total hip arthroplasty using a direct anterior modified Huerter approach from January 1, 2021, to March 31, 2022. This population consisted entirely of patients receiving care paid through Medicare. Demographic information, insurance status, length of stay in the PACU, American Society of Anesthesiologists (ASA) classification, mortality, medical complications, and surgical complications of these patients were recorded. Analysis was conducted to further characterize and define this population.

RESULTS: A total of 101 Medicare patients undergoing total hip arthroplasty were identified. The average age of this population was 73.74 years. The average BMI was 28.29. The average ASA was 2.29. The average time spent in the PACU postoperatively was 82.95 minutes. Of the 101 patients, 8 had an ASA score of 1 (7.92%), 56 had an ASA score of 2 (55.44%), and 37 had an ASA score of 3 (36.63%). Out of the 101 patients, there were only two complications. One patient suffered a wound incision seroma, and another patient suffered a fall.

DISCUSSION AND CONCLUSION: This data characterizes a population of Medicare patients undergoing Total Hip Arthroplasty at an outpatient surgical center. It is important to note how few complications exist in this population, especially in a population with 36.63% having an ASA score of 3. This study demonstrates that total hip arthroplasty can be conducted safely and successfully in an elder Medicare population outside of the hospital setting.