

## **2006-2022 Single Center Medicare and Commercial Total Joint Arthroplasty Reimbursement Trends**

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**INTRODUCTION:** Recent publications addressing physician compensation trends for total joint arthroplasty (TJA) utilize publicly available Medicare data sets and implicitly assume that commercial payors will follow Medicare. Our purpose is to report commercial and Medicare reimbursement trends for 24,889 primary total joint arthroplasties (TJA) performed from 2006-2022 at one center. We also examined the impact of the January 2021 CPT coding change (2021CC) on reimbursement.

**METHODS:** This retrospective review of reimbursement data based on billing records examined changes in total reimbursement and by phase of care. The phases of care included the visit prior to surgery (PTS), day of surgery (DOS), and the 90-day global period (GP). TJAs that required reoperation within the global period were excluded. To evaluate the impact of the 2021CC, we compared TJAs done from 2019-2020 to those done during 2021-2022. Statistical analyses were performed with SPSS and a p-value of 0.05 was defined as the threshold for statistical significance.

**RESULTS:** Over 17 years, nominal reimbursement decreased 5.1% while consumer price index adjusted reimbursement decreased 33.1%, representing a 2.5% annual decrease. Based on the phase of care, PTS, DOS, and GP represented 9.1%, 88.5%, and 2.2% of the inflation-adjusted total reimbursement, respectively. On average, commercial reimbursement was 7.9%±5.4% higher than Medicare. Importantly, inflation-adjusted Medicare and commercial reimbursements decreased at similar rates (p=0.70). After the 2021CC, nominal reimbursement for the PTS phase of care increased 30.4% but DOS decreased 5.7%, resulting in a 1.0% net decrease in reimbursement (p=0.02).

**DISCUSSION AND CONCLUSION:** The decreasing reimbursement at our institution is in concordance with prior studies. Using reimbursement data from a high-volume urban location, we have shown that commercial reimbursement has paralleled Medicare over 17 years. The 2021CC increased the reimbursement associated with the PTS visit but the net was a 1% decrease in total reimbursement.