

Disparities in Access to Orthopedic Hand Surgeons Among Medicare Advantage Plan Beneficiaries

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INTRODUCTION: Carpal tunnel syndrome is the most common nerve entrapment neuropathy, affecting 4-5% of the population in the United States. Elderly patients are at an increased risk of severe cases of carpal tunnel syndrome. It is estimated that there are 400,000 to 600,000 carpal tunnel releases performed annually, making it the most performed surgical hand procedure in the United States. With the increasing elderly population, it is important to study the accessibility to this procedure, with elderly patients primarily being insured by traditional Medicare and Medicare Advantage plans. Our study looks at Medicare Advantage plans, Medicare, and private insurance and the difference in access to carpal tunnel release surgery.

METHODS: This was a cross-sectional study in which hand surgeons in Florida were identified from the American Academy of Orthopedic Surgeons directory. The surgeons' offices were contacted on four occasions by four separate researchers to assess insurance acceptance and earliest appointment availability. The researchers utilized a script for a fictitious patient seeking carpal tunnel surgery. No real patient data was used or collected with this method. Insurance plans assessed included Traditional Medicare, Blue Cross Blue Shield (BCBS) BlueOptions PPO, and two Medicare Advantage plans, Humana Choice PPO and United Health Preferred Choice HMO. Physicians who retired, relocated, or were unable to be contacted were excluded from the study.

RESULTS: Forty-four of the original 118 orthopedic hand surgeons satisfied the inclusion criteria and were accepting new consultations for carpal tunnel release surgery. Of the 44 eligible surgeons, 97.7% accepted BCBS BlueOptions and 100% accepted Traditional Medicare. The Medicare advantage plans were accepted at a lower rate. Humana Choice and United Healthcare were accepted 70.5% and 54.5% of the time, respectively. Humana Choice and United Healthcare were accepted at a significantly lower rate when compared to BCBS and Traditional Medicare ($p < 0.001$). There was no significant difference between the number of business days to an appointment between the insurance groups ($p = 0.96$).

DISCUSSION AND CONCLUSION: The outcome of this cross-sectional study shows that, in Florida, patients enrolled in Medicare Advantage plans are at a disadvantage when trying to access orthopedic hand care when compared to those enrolled in traditional Medicare or private plans. It is unclear the root cause of this disparity in access to care. Further investigation is warranted to determine if the observed differences can be attributed to variations in reimbursement rates, specific policies within Medicare Advantage plans, or other underlying factors.

Figure 1: % of Acceptance per Insurance

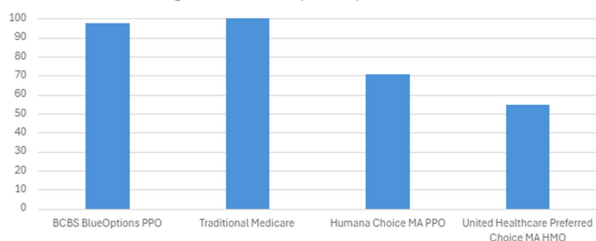


Figure 2: Average # of Days to Earliest Appointment

