

Fewer orthopedic surgeons accepting pediatric Medicaid patients

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Compared to six years ago, the number of orthopedic surgeons willing to see a child with a broken arm who is covered by Medicaid has dropped 39 percent, and even children with private insurance may face obstacles in getting a timely appointment, according to research presented Oct. 21 at the American Academy of Pediatrics (AAP) National Conference and Exhibition in New Orleans.

In the study, "National Access to Pediatric Fracture Care," five general orthopedic practices were identified in each state. Each office was called with a private [cellphone](#) using the following script: "My 10-year-old son broke his arm while out of the country last week. He was splinted and told to see an [orthopedic surgeon](#) within one week. His fracture does not involve the growth plate."

Only 23.2 percent (58 out of 250) of the practices across the country agreed to schedule an appointment for a pediatric fracture patient with Medicaid. Of the offices that declined an appointment request, 38 percent said that they do not accept [Medicaid patients](#). The 10 states with the lowest Medicaid reimbursement rates offered an appointment 6 percent of the time; the 10 states with the highest level of reimbursement, 44 percent. The same group of 10 lowest Medicaid reimbursement states offered an appointment to a PPO patient 88 percent of the time, and the 10 best Medicaid reimbursement states, 82 percent of the time. Eighty-two percent of the offices nationwide agreed to see a patient with private PPO insurance. Nine states were identified where all five offices refused the Medicaid patient, but all five accepted

the PPO patient (Connecticut, Illinois, Louisiana, New Jersey, North Carolina, Oklahoma, Rhode Island, South Dakota and Texas).

Compared to data published in 2006, the number of offices in 2012 willing to see a child with [private insurance](#) has declined from 92 percent to 82 percent. The number of offices willing to see a child with a fracture and Medicaid insurance has decreased from 62 percent to 23 percent – a decline of 39 percentage points.

"Underinsured children continue to have difficulty accessing care for their fractures," said study author Christopher Iobst, MD, who cited low [Medicaid](#) reimbursement rates as the most likely reason for practices refusing to see patients. In addition, "patients with private insurance are also being turned away at an increasing rate" for a variety of reasons. Forty-six percent of the offices contacted in the study were unable to refer the family to an orthopedist who would take care of the child.

"This paradigm shift has resulted in a greater number of children getting referred to pediatric tertiary care centers (hospitals) for their care, even for routine injuries," said Dr. Iobst. While receiving care at these centers is beneficial, "many patients are forced to drive long distances to receive care for routine injuries. This places an unnecessary burden on families that often have limited resources."

Provided by American Academy of Pediatrics

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