

Operating time for hip, knee replacement overestimated

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(HealthDay)—The Medicare Physician Fee Schedule and most recent

Relative Value Scale Update Committee recommendations overestimate the operating time for original and revision hip and knee replacements, according to a study published in the July issue of *Health Affairs*.

John W. Urwin, M.D., from Beth Israel Deaconess Medical Center in Boston, and colleagues analyzed actual service time for total hip and [knee](#) replacements at two academic hospitals during Jan. 1, 2013, to Oct. 1, 2016, using electronic health record (EHR) time-stamp data. Those times were compared to the Medicare Physician Fee Schedule and most recent Relative Value Scale Update Committee recommendations.

The researchers found that the committee and fee schedule overestimated the operating time of original hip and original knee replacements by 18 and 23 percent, respectively; revision hip and knee replacements were overestimated by 61 and 48 percent, respectively. Faster operating time was not associated with more complications or admissions to the [intensive care unit](#) in multivariate analysis. Across physicians and hospitals, complication rates varied 10-fold and twofold, respectively.

"Given the feasibility of real-time surgical tracking using operating room time-stamp logs in EHRs, it is no longer justifiable to use self-reported time estimates rather than [empirical data](#) on actual procedure times to pay physicians," the authors write.

One author disclosed financial ties to the [pharmaceutical industry](#) and health care organizations.

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