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Bundled payments: Study finds causes of hospital readmissions following joint replacements

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A new study from researchers at NYU Langone's Hospital for Joint Diseases identifies common causes of hospital readmissions following total hip and knee arthoplasty procedures. By finding these common causes, researchers believe quality can be increased and hospital costs decreased.

The study will be presented Friday, March 27, 2015 at the American Academy of Orthopaedic Surgeons Annual Meeting in Las Vegas.

The patients were part of the Bundled Payment for Care Initiative from the Centers for Medicare and Medicaid Services (CMS), a government pilot program where hospitals are paid for quality of procedures rather than quantity. One way to measure quality is by examining hospital readmission rates.

Researchers studied 721 patients admitted to NYU Langone's Hospital for Joint Diseases between January and December 2013 for a total hip arthoplasty (THA) or total knee arthoplasty (TKA). Of those cases, 80 patients, or 11 percent, had to be re-admitted within 90 days.

THA and TKA readmissions due to surgical complications accounted for 54% and 44% of the indications for readmissions, respectively. Surgical complications included infection (11), wound complications (8) bleeding (7), periprosthetic fracture (5), dislocations (4), and post-surgical pain

(4). The average cost of readmission for surgical complications was $36,038 for THA and $61,049 for TKA.

Medical complications included gastrointestinal disease (11), pulmonary disease (8), genitourinary/renal complications (6), hematologic (6), cardiovascular (3), endocrine disorders (2) syncope (2), rheumatologic (1), lumbago (1), and an open ankle wound (1). The average cost of medical complications was $22,775 for THA and $10,283 for TKA patients, respectively.

"While some complications are unavoidable, we are proud of our low readmission rates at the Hospital for Joint Diseases and by identifying the causes for readmission, we hope to reduce our rates even further," says study co-author Joseph Bosco, MD, associate professor and Vice Chair for Clinical Affairs in the Department of Orthopaedic Surgery at NYU Langone. "As bundled payment programs are implemented more widely nationwide, other U.S. hospitals will follow our example and implement strategies to boost quality and reduce medical costs."

More information: Paper 860: Cost Analysis of Total Joint Arthroplasty Readmissions in a Bundled Payment Care Initiative, American Academy of Orthopaedic Surgeons Annual Meeting in Las Vegas

Provided by New York University School of Medicine

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