Hip and knee replacement surgeries represent the highest line item in the federal Centers for Medicare & Medicaid Services (CMS), budget. While the procedures are already considered cost-effective, the federal government wants hospitals to make further improvements in cost and quality.

A redesign of the joint-replacement program by the University of Florida College of Medicine's Department of Orthopaedics and Rehabilitation, however, managed to lower costs while shortening hospital stays and reducing both readmissions and complications, according to a new UF Health study published in the journal Arthroplasty Today. Additionally, pain management and mobility after surgery were dramatically improved, allowing patients to recover at home instead of at rehabilitation facilities, the study said.

Physicians said their experience may provide a blueprint for implementing a value-added program that does not “cherry-pick” patients to meet cost requirements imposed by the CMS. The study’s lead author, Chancellor F. Gray, M.D., (assistant professor in the UF College of Medicine’s Department of Orthopaedics and Rehabilitation) and Hari K. Parvataneni, M.D., (an associate professor and division chief of the adult arthroplasty and joint reconstruction program at UF Orthopaedics) said the department had been looking for synergies to refine care when the CMS mandated the changes in April 2016.
Redesign of UF Health Orthopaedics Joint Replacement Program posts big gains in patient care
Published on Department of Orthopaedics and Rehabilitation » College of Medicine » University of Florida (http://www.ortho.ufl.edu)

A recent article from the UF Health outlines some of the key changes and outcomes for the joint replacement program:

"Our concept is that any change that decreases cost shouldn’t affect patient outcomes,” said one of the study’s co-authors, Hari K. Parvataneni, M.D., an associate professor who is division chief of the adult arthroplasty and joint reconstruction program in the UF College of Medicine’s department of orthopaedics and rehabilitation. "And that's the crux of value-based care. It's basically quality divided by cost. Every change has to be based on what is best for the patient."

... 

"The longer you stay in a hospital, the more likely you are to be readmitted to the hospital, the more likely you are to end up in a nursing home," said Gray. “So, it's been helpful for improving outcomes to equip patients to get home sooner, and it also enhances recovery because, when you get home sooner, you start getting back to your life."

Additional authors of the study are Hernandez A. Prieto, M.D., [8], an assistant professor in the UF College of Medicine’s department of orthopaedics and rehabilitation, and Andrew T. Duncan, M.B.A., P.T., D.P.T. [9], executive director of the department.

You can read the full article online via the UF Health Newsroom [10]:

- Redesign of UF Health joint replacement program posts big gains in patient care [11]

Additional coverage on this topic can be found via the Independent Florida Alligator:

- UF College of Medicine redesigns joint replacement program to cut costs for patients [12]

You can also read the full research publication via Arthroplasty Today [13]:

- Arthroplasty care redesign related to the Comprehensive Care for Joint Replacement model: results at a tertiary academic medical center [14] (PDF)
- Arthroplasty care redesign related to the Comprehensive Care for Joint Replacement model: results at a tertiary academic medical center [15] (web version)


Links:
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