



A Critical Analysis of the Medicare Reimbursements Trends Among Neurosurgeons in Louisiana

Richard P Menger MD; Michael E. Wolf MD; Anil Nanda MD, FACS; Jessica A. Wilden MD
Louisiana State University Health Sciences Center Shreveport



Introduction

Mainstream publications have recently reported Medicare reimbursement for each physician in 2012. This data has been widely sensationalized without taking into account the patient population served. Our objective is to examine the factors contributing to Medicare surgeon reimbursements per capita in the population over 65 years old in Louisiana.

Methods

The 2012 Medicare Reimbursement Database was used to obtain payments received by each Louisiana neurosurgeon for all Medicare procedures. Census information about each county in Louisiana was also obtained. Pairwise comparisons were used to investigate differences between counties with >50% or <= 50% of their neurosurgeons receiving above average Medicare reimbursements. High-Expenditure Physicians were identified as the top 10 surgeons in Medicare reimbursements in the state.

Results

65 neurosurgeons in Louisiana received \$3.3 million from Medicare in 2012. Pairwise analysis found that counties with >50% of their neurosurgeons receiving above average Medicare reimbursements had significantly lower median home values and significantly larger geographic size (p<0.05). Overall Medicare spending per capita did not differ between counties that contained a High-Expenditure Physician and those that did not. Regression analyses found that the number of High-Expenditure Physicians in each parish was not correlated with Medicare reimbursements. Median home values, education level, geographic size, and population density best predicted total Medicare expenditures per capita per surgeon (p<0.01).

Conclusions

This study demonstrates that neurosurgeons who served large geographic rural areas populated by patients with less education and lower home values were more likely to receive Medicare dollars. The presence and number of High-Expenditure Physicians were not major factors related to Medicare spending. This suggests that the Medicare payments to surgeons are not solely related to individual neurosurgeons’ practice patterns. Considering the widespread and misleading use of the Medicare Reimbursement Database, neurosurgeons need to take a proactive role in understanding this information and its analysis.

Learning Objectives

Describe factors affecting Medicare reimbursement trends. Describe demographic contributions to Medicare reimbursement figures. Describe the socioeconomic factors that affect our patient care.

References

1. Allain J-M, Lurie, J, Olson P, Bronner K, Fisher E: United States’ trends and regional variations in lumbar spine surgery: 1992-2003. Spine 1:2707-14, 2006
2. Andres TM, Park JJ, Ricart Hoffiz PA, McHugh BJ, Warren DT, Errico TJ: Cost analysis of anterior-posterior circumferential fusion and transforaminal lumbar interbody fusion. Spine J Off J North Am Spine Soc 13:651-656, 2013
3. Bederman SS, Coyte PC, Kreder HJ, Mahomed NN, McIsaac WJ, Wright JG: Who’s in the driver’s seat? The influence of patient and

