Insurance Type Affects Total Knee Outcomes

TK Nelson, PhD, PT, J Thompson, DPT, OCS, Cert MDT, V Dasa, MD, D Mercante, PhD, B Bates, SPT, C Broekstra, SPT

Purpose:

The purpose of this study was to determine if outcomes differ in Medicaid patients compared to Medicare and private insured patients after total knee arthroplasty. A retrospective chart review of patients who received a unilateral total knee arthroplasty between May 2008 and March 2011 by a single surgeon were compared and stratified according to medical insurance payer source. We hypothesized that functional outcomes of Medicaid patients would be lower than patients with Medicare and Private Insurance.

Materials/Methods:

161 patient charts were reviewed and 62 charts excluded for incomplete data leaving 99 complete charts (21 medicaid patients, 62 medicare patients, 16 private insurance patients) for review. Functional outcome measures collected prospectively including SF-12, WOMAC, and Oxford Knee Scores were assessed. These measures were administered to patients pre-operatively and at their 6, 12, and 24 week post-op visits. A linear mixed effects model was used while adjusting for correlations across time.

Results:

All subjects had statistically significant (p<0.05) improvement post arthroplasty in their functional outcome scores over time except the SF-12 Mental. Medicaid patients had significantly poorer WOMAC scores (16.0 vs 20.6 +/- 8.8) and oxford scores (19.6 vs 40.2 +/- 4.6) at 6 months compared to patients with private insurance (p< 0.05). Medicare patients had statistically significant poorer results in womac scores compared to private insurance (21.2 vs 16.0 +/-4.9, p<0.05).

Conclusions:

These Findings suggest Medicaid and medicare patients have significantly lower functional outcomes than patients with private insurance. Patients with Medicaid and Medicare had lower physical health, lower function, and more pain when compared to patients with private health insurance. Payer status may be an independent risk factor in assessing total knee outcomes.