

#### AAHKS Health Policy Fellowship 2016-17

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## Background





#### **UF**|Orthopaedics and Rehabilitation

### **A Transformative Experience**

#### Editorial



What We Really Think: The Device Industry in/with/against/versus/and Orthopaedics



Chancellor F. Gray, MD and Samir Mehta, MD

#### **Total Joint Reconstruction**

# Epidemiology, cost, and health policy related to total knee arthroplasty

Chancellor F. Gray, MD<sup>a</sup> and Kevin J. Bozic, MD, MBA<sup>a,b</sup>

<sup>a</sup>University of California, San Francisco, Department of Orthopaedic Surgery, San Francisco, CA <sup>b</sup>University of California, San Francisco, Philip R. Lee Institute for Health Policy Studies, San Francisco, CA



### Institutional Projects 2016-2017

- Value-Based Care Redesign for CJR
- AJRR Participation, Uniform Collection of PROs
- Understanding Costs of TJA Care in Self-Insurance Program (GatorCare)
- Time-Driven Activity Based Costing Model for TJA
- OR Efficiency Pathway
- Outpatient Surgery Program and Narcotic-Free Surgery Program
- Creation of Division-Wide Dashboards for Quality Measures
- Implant Utilization Standardization/ Pricing

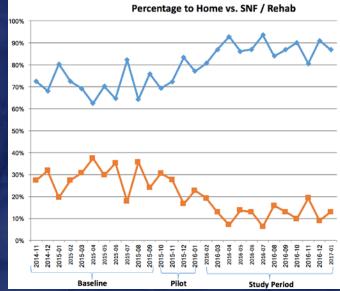
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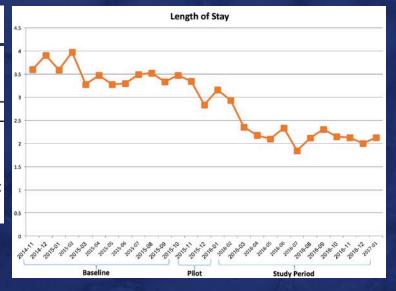
# **CJR-Redesign**

#### • Goals:

- 1. Improve quality and value of care
- 2. Improve performance in CJR

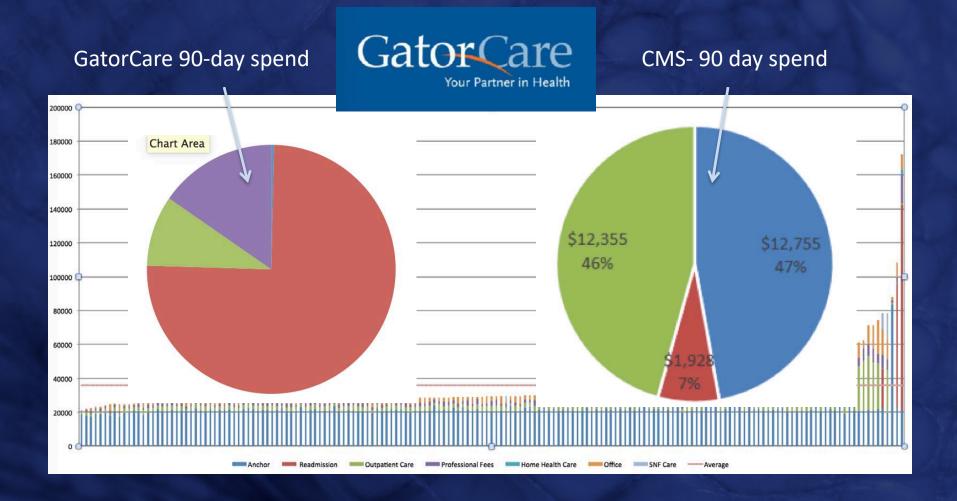


	Baseline	Study Period
Readmission Rate	4.9%	3.9%
Medicare	4.9%	5.2%
Non-Medicare	4.9%	3.0%
Cost change from baseline		
Direct (hospital)		-27%
Cost to CMS (versus target)	4.8% (vs national average episode cost)	-11% (vs national target price)



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# Understand Costs of MSK Care via Self-insurance Program



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### Thank You

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