Spine Surgeons in the Crosshairs: How Data and Registries Allow Payers and Patients to Evaluate You

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Experience and Disclosures:
- Washington DC Lobbyist for Innovation in Health Care - Includes multiple White House committee meetings (OSTP, NEC, OMB, NNI), Senate, Congress, CMS, NIH, FDA, HHS/DIG, PAC/NPSC, NIBIB, VA, etc.
- Appointed to FDA sponsored MDEpiNet Executive Operations Committee as industry collaboration vehicle for evidence based medicine, reporting, and registries
- Titan Spine Vice President of Strategic Partnering
- 15 years of healthcare negotiation and contracting experience in

Overview:
The introduction of data points and the development of infrastructure has paved the way to new metrics that are used to redefine standards for success. Moving forward, these metrics and the rankings they generate will be outwardly visible to patients and payers.

Politics and Policy Market Influencers & Key Goals

Surgeons
- Improve Patient Outcomes
- Professional Reputation
- Explore Science
- Comfort Level
- Personal Interests

Manufacturers
- Grow Business
- Differentiate if Better
- Protect Business
- Revenue
- Utilization

Hospital Administration

Insurers / Payers
- Total Cost of Care
- Episodic Cost of Care

Government
- Grow and Protect Revenue
- Commodified / Control Cost
- Improve Patient Outcomes
- Control Risk/Safety
- Reduce Variation
- Requirement Compliance
- Business Model – ACO/NonProfit/ForProfit

Politics and Policy
- Control/Influence on Total Population Health
- Increased Visibility
- Increased Cost Control

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Reasons for New Scrutiny in Spine Surgery

- Elective Surgery Classification
- Variability in Costs and Outcomes Without Alignment
- Readmission Rate as a Percent
- Patient Disease State Prevalence
  - #2 in reasons for MD visits (behind respiratory illness)
  - Over six million people in the U.S. are being treated for chronic back pain (that is pain lasting for longer than three months that is unresponsive to treatment)
  - Workers missed 149 million days of work due to low back pain alone accounting for $28 Billion in lost productivity
- International Consortium of Orthopedic Registries (ICOR) has agreed to work with MDEpiNet and HIVE
  - "Success" from evaluation on Hips and Knees is encouraging and Spine is the next step.

Hospital Cooperation to Keep and Protect Revenue Tied to Surgery and Surgery Outcomes

- ACA Outcome Revenue Penalties
  - 1.0% - HAC
  - 3.00% - HRRP
  - 1.75% - HVBP
  - HCAPS – 25%
  - Efficiency – 15%
  - Clinical Process – 10%
  - Outcomes – 40%
  - 2% - Meaningful Use
  - Phase 1 – Data Capture
  - Phase 2 – Advance Clinical Process
  - Phase 3 – Improved Outcomes

Pain control is the highest indicator of a positive score and impacts many areas outside of this single category.
Where Is Data Pulled to Determine Surgeon Success?

What Does this New Data Mean?

- More Points of Evaluation
- Significantly Shorter Start of Evaluation

![Discharge Diagram]

Current Surgeon Ranking Progression

Top Doctors – Madison Media Advertising
- Castle Connolly
- Super Doctors
- Top Doctor's Handbook
- City/Regional Magazine Top Doctors Issues

Propublica Surgeon Scorecard
- Launched July, 2015
- CMS patient data for 2.3 million procedures: hip and knee replacements, three types of spinal fusion, gallbladder removals, prostate removals and prostate resections
- 16,019 Surgeons rated in Propublica analysis
- 30 Day Complications
- 30 Day Readmissions (over 63,000 reported)
- 30 Day Mortality (over 3,400 reported)

Surgeonratings.org
- Launched July 2015
- Analysis of over 4.8 million surgeries done for hospital inpatients by more than 50,000 surgeons
- Reward high surgical volumes
- Report any inpatient adverse outcome (death or prolonged length of stay)
- Death within 90 days of discharge
- Any adverse within 90 days after discharge
- Readmission within 90 days after discharge
Example of Current Surgeon Comparisons

Free Public Evaluation: Surgical and post surgical complications for "like" patients in high cost, elective surgeries.

Compare hospitals, surgeons, or the combination of the two.

Limitations: CMS only.

Limited information on

- Must have preformed 20 or more CME completed cases with completed follow up for data cases for data to be used.
- Must have over 10 complications for complication total number to be shown.
- Adjusted complication score is complications minus expected complications divided by total cases for each surgeon.

- The addition of outpatient fusion codes means more facilities and more surgeons will begin to populate in this type of data pool.
The Next Phase: “Patients Like Me” Concept

MDEpiNet Established Operating Initiatives

- Data Extraction and Longitudinal Trend Analysis System (DELTA)
- Patient-Centered Outcomes Research Institute’s (PCORI)
- Clinical Data Research Networks (CDRN)
- International Consortium of Orthopaedic Registries (ICOR) public-private partnership, with over 30 registries & 4.5 million implants involved
- Claims Based Research Initiative (CBRI) program evaluates well established and new/innovative devices and device-based interventions in medicine.
- Responsible for the Formation of National Medical Device Registry

A Closer Look at HIVE
(High Performance Integrated Virtual Environment)
Protect Your Reputation

Assess unrealized improvement opportunities:
- Surgeon/staff education
- Procedure type modification based on patient type
- Product utilization (some products or product combinations are better than others for outcomes)
  - Don’t allow cross references – products stand on their own merits.

Concepts to consider:
1. Improve desired and measured outcomes, shorten recovery timelines, control pain (focus on readmissions, post-op discharge days, time to start physical therapy, infection rates, revision rates, days of physical therapy attained, post-surgical epidurals, pain pill management, total cost of care)
2. Look yourself up on rankings to get a baseline
3. Understand that the “Patients like me” means you can’t get too comfortable
4. Generate your own data – insurance companies are looking for this

Modify follow up practices:
- Refocus follow up on key measurement areas