

Abstract

Impact of Medicaid, Medicare, and Private Insurance on Access to Orthopedic Surgeons of the Spine: A National Mystery Caller Study

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Introduction: Access to specialized healthcare remains a significant challenge in the United States. Patients with Medicaid often experience reduced access to specialty care, including orthopedic specialties, compared to patients with Medicare or private insurance. Limited national-level data exists on access to spine surgery across different insurance types. This study aimed to assess the impact of insurance type on access to and appointment wait times for fellowship-trained orthopedic spine surgeons for patients with urgent diagnoses.

Methods: The study utilized a cross-sectional audit (mystery caller) study design with fellowship-trained orthopedic spine surgeons listed in the American Academy of Orthopedic Surgeons public directory. Using a standardized clinical vignette, trained callers contacted 304 orthopedic spine surgeon offices across 45 states. Callers contacted each office three times (for Medicaid, Medicare, and for BCBS) in a randomized order. Poisson mixed-effects regression model with a log link was used to estimate the association between insurance type and wait times, controlling for physician and practice characteristics.

Results: Of 304 physicians called, 192 physicians meeting inclusion criteria were successfully contacted. Among the eligible practices, 101 (52%) accepted Medicaid, 182 (95%) accepted Medicare, and 190 (99%) accepted BCBS insurance. If physicians accepted Medicaid insurance, the mean wait time for a new patient appointment was 26.6 business days (95% CI: 25.6–27.6). Patients with Medicare or BCBS insurance waited 23.1 (95% CI: 22.4–23.8) and 22.1 (95% CI: 21.5–22.7) business days for a new patient appointment, which was significantly fewer days than patients with Medicaid (IRR: 0.90 [95% CI: 0.83–0.98], $p=.01$; IRR: 0.88 [95% CI: 0.81–0.94], $p<.01$, respectively). Academic affiliation was associated with a 124% longer wait time (IRR: 2.24 [95% CI: 1.25–4.03], $p<.01$).

Conclusion: When seeking care with an orthopedic spine surgeon, patients with Medicaid experienced decreased access to care and longer wait times for a new patient appointment compared to patients with Medicare or BCBS insurance. Further, academic practice affiliation was associated with the most significant increase in wait time for a new patient appointment. These findings highlight a notable disparity in access to care faced by a vulnerable patient population, further emphasizing the need for additional research to implement novel interventions and solutions.