

Professional Reimbursements in Maxillofacial Trauma Surgery:

Effect of the Affordable Care Act

Synopsis

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Background: Surgical treatment of maxillofacial injuries has historically been associated with low reimbursement rates, mainly due to the high proportion of uninsured patients. The Affordable Care Act (ACA), implemented in January 2014, was designed with the goal of reducing the number of uninsured. If the ACA achieves this goal, maxillofacial trauma surgeons may benefit from improved reimbursement rates. Our purpose was to evaluate the effect of the ACA on payor distribution and reimbursement rates for maxillofacial trauma surgery at our institution.

Methods: A review of all patients undergoing surgery for maxillofacial trauma over 3 years (January 2012 to December 2014) was conducted. Insurance status, amount billed, and amount collected were recorded. Reimbursement rate was calculated. Patients treated before the ACA were compared to patients treated after the ACA.

Results: 523 patients were analyzed. 334 patients underwent surgery before the ACA, and 189 patients after. After the implementation of the ACA, the proportion of uninsured patients decreased significantly (27.2% to 11.1%, $p<0.001$), and the proportion of patients on Medicaid increased significantly (7.8% to 25.4%, $p<0.001$). The overall reimbursement rate increased from 14.3% to 19.8% ($p<0.001$).

Conclusions: After the implementation of the ACA, we observed a significant reduction in the proportion of patients with maxillofacial trauma who were uninsured, and a significant increase in those on Medicaid. The reimbursement rate by most insurance providers improved, resulting in a significant increase in our overall reimbursement rate. These trends should be followed over a longer term to determine the full effect of the ACA.