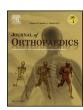
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# Original Article

# Attitude of hand surgeons toward Affordable Care Act: A survey of members of American Society for Surgery of the Hand\*



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#### ABSTRACT

The purpose of this study was to examine current attitude of hand surgeons toward the Affordable Care Act (ACA). An electronic survey was sent to members of American Society for Surgery of the Hand (ASSH) to examine their attitude toward the Affordable Care Act. 974 ASSH members responded to the survey (33% response rate). The majority of respondents were male (89%), trained in orthopedic surgery (81%), and in private practice (75%). 41% of respondents rated their knowledge of the ACA as average. Respondents disagreed that the ACA would improve healthcare in the United States (median 2, mean 2.06, scale 1-5), while agreeing that the ACA would decrease reimbursements specific to hand surgery (median 4, mean 4.11).

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### 1. Introduction

The Patient Protection and Affordable Care Act, more commonly known as the Affordable Care Act (ACA) or "Obamacare," was signed into law on March 23, 2010. Several challenges facing the American health care system led to the development of this law. Nearly 50 million people, a sixth of the United States (US) population, were reported not to have health insurance in 2010. The same year, health care spending accounted for 17.6% of gross domestic product (an estimated 2.5 trillion dollars), which far exceed that of any other industrialized country such as Netherlands (12.0%), Germany (11.6%), or France (11.6%).<sup>2</sup> Despite this spending, the quality of health care in the United States has compared poorly to the rest of the world, ranking 37th in the 2000 World Health Organization report and 6th in the 2010 Commonwealth Fund report.<sup>3,4</sup>

2. Materials and methods

projected changes in practice plans.

before distribution.

This survey study was approved by the American Society for Surgery of the Hand (ASSH) and our Institutional Review Board

Designed with the intent to address these issues, the ACA is a complex law that spans nearly one thousand pages. 5 The bill's most

notable provisions include expansion of Medicaid, a mandate to

purchase insurance, creation of insurance marketplaces, establish-

ment of limits on insurance companies regarding patient exclusion, implementation of electronic medical records, and

restructuring of the Medicare reimbursement system.<sup>6-9</sup> There

has been vigorous debate regarding the impact of these provisions

on quality of and access to health care services, including the potential burden these provisions may place on individual

practices. The ACA's complexity has also led to concerns about the extent to which health care providers understand the new

health care reform law. 10 Despite the criticism, the ACA was

constitutionally upheld by the US Supreme Court in 2012 and has

been gradually implemented. 11,12 The purpose of this study was to

examine the current attitude of hand surgeons toward the ACA, assess their self-described knowledge of the law, and ascertain

<sup>\*</sup> This work was presented at the 2015 AAHS Annual Meeting (January 21-24, 2015) and 2014 Northeastern Society of Plastic Surgeons 31st Annual Meeting (September 12-14, 2014).

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#### 2.1. Survey design and distribution

An anonymous web-based survey was developed and electronically delivered to members of the ASSH. Per ASSH guidelines, the survey was sent twice at one-month intervals (March and April 2014). The survey consisted of 31 questions and was formatted to a single web page (Fig. 1). Section 1 of the survey collected data on demographics, practice type, and payer make-up. Section 2 of the survey queried the respondents' self-reported knowledge and preparedness regarding the ACA. Section 3 examined the respondents' attitude toward the ACA, including the ACA's potential impact on health care quality, reimbursement for hand surgery, and access to emergent and elective hand surgery. Section 4 asked the ASSH members if the ACA would alter their practice plans. When applicable, a five-point Likert scale was utilized (strongly disagree = 1, disagree = 2, neutral = 3, agree = 4, strongly agree = 5).

## 2.2. Data analysis

Online survey data was exported into Microsoft Excel (Microsoft Corporation, Redmond, WA). Statistical analysis was performed utilizing Stata11 statistical package (StataCorp, College Station, TX). Descriptive statistics were generated. Bivariate statistical analysis was performed using the chi-squared test

where appropriate. Likert scale data was treated as ordinal variables without equal distribution between categories, and the data was analyzed using non-parametric statistics (Wilcoxon Rank Sum test). Median and mean values and ranges were generated. All p values were based on non-parametric analyses, and a p value of  $\leq$ 0.05 was considered to be statistically significant.

#### 3. Results

## 3.1. Demographic data

A total of 974 ASSH members responded to the survey (33% response rate). The geographic regions that generated the most responses were the Pacific Coast, South Atlantic, Mid-Atlantic, and eastern Midwest (Fig. 2a). The majority of respondents were male (89%), trained in orthopedic surgery (81%), in private practice (75%), and had more than 15 years in practice (56%) (Fig. 2b–e). Nearly all of them (97%) had completed a hand fellowship. 45% worked in a small group practice, while 22% worked in a hospital, 17% worked in a large multispecialty group, and 14% were in solo practice. Clinical responsibilities made up the majority of respondents' work, with less time dedicated to research and administrative duties (data not shown). The anticipated primary payer was most commonly private forms of insurance, followed by Medicare, Medicaid, and uninsured patients (data not shown).

1. Age 7. Completion of hand fellowship 2. Gender 8. Type of practice 3. Race 9. Practice setting 4. Region of practice 10. Frequency of hand trauma call 5. Training background 11. Payer make-up of practice 6. Years in practice 12. Other questions						
II. ACA Knowledge and Preparation (questions 20-24)						
<ol> <li>Have you received any training on the coming or related to the ACA?</li> <li>If yes, what type of training have you received?</li> </ol>		No O	Yes			
<ol> <li>How would you rate your knowledge of the ACA</li> <li>How well are your major professional organizati preparing you for the changes related to the AC</li> <li>What materials have you received concerning the</li> </ol>	ons A?	Very poor	Poor O	Average	Good O	Excellent  O
III. Attitude Toward the ACA (questions 25-28)						
<ol> <li>The ACA will improve health care in the United</li> <li>The ACA will decrease reimbursements in hand</li> <li>The ACA will improve access to emergent hand</li> <li>The ACA will improve access to elective hand s</li> </ol>	d States surgery surgery	Strongly lisagree	Disagree	Neutral	Agree	Strongly agree
IV. Impact of the ACA on Practice (questions 29-31)						
<ol> <li>Will the ACA cause you to retire earlier than pla</li> <li>Will the ACA cause you to alter your practice?</li> <li>Reasons for retirement or altering practice?</li> </ol>		No ○ □	Yes O			

Fig. 1. Summary of survey questions.

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