Are Weight Bearing CT Systems Cost Effective for Ortho Practices?

Cost Analysis and Utilization of Weight Bearing CT at a Tertiary Referral Foot and Ankle Practice

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BACKGROUND

- WBCT is imaging modality that is gaining popularity for a variety of foot and anklepathologies
- Has demonstrated value in accurately evaluating 3D relationships of osseous structures under physiologic load
- Based on Cone-Beam CT protocol
- To date no US-based study has evaluated financial implications of acquiring such a device



34.6 scans per month

58377 average gross income

based on payor mix

average gross income based on Medicare reimbursement

25 Months to pay off device using payor

mix at study institution

37 Months to pay off device using

Medicare-only reimbursement

Payor

n	1704	
Male	784	
Female	920	
Age	44 (6-92)	
- 5 Fellowship trained foot and		

Patients

Medicare	18.8%	\$163.50
Medicaid	14.2%	\$ 99.74
Private	61.7%	\$294.30
WC	5.1%	\$294.30
Self Pay	0.2%	\$294.30
Average re	imbursement	\$242.11
le surgeons		

Proportion

- an ordered /9./% of WBC
- Foot and ankle staff ordered 65.3% of bilateral WBCT
- Most imaged anatomic region ankle; most common reason for imaging - traumatic injury

- Average of 26 scans per month



Est. Reimbursement

physiologic load.



- WBCT can be financially viable asset in large
 - Payor mix and reimbursement agreement with private insurers affect cost effectiveness
- Future focuses of study include use of WBCT for templating, assessment of fusion/healing, development of standardized scheme for evaluating 3D relationships between osseous structures of foot and ankle with and without