

LETTERS

CMS Reimbursement Reform

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To the Editor:

In a well-designed study, Gidwani and Bhattacharya report that the incidence of venous thromboembolism (VTE) following elective hip and knee replacements decreased after Centers for Medicare and Medicaid Services (CMS) reimbursement reform.¹ Although these results are encouraging at face value, an important alternate explanation was not addressed. Historically, routine screening for asymptomatic deep vein thrombosis after high-risk orthopedic procedures was advocated to prevent symptomatic VTE. In response to the disincentive of CMS reimbursement reform, institutions may have shifted

their practice from liberal duplex ultrasonography testing of Medicare-aged patients to a more conservative approach of testing only symptomatic patients with a high likelihood of VTE. It would be informative to evaluate whether charges for duplex ultrasonography decreased in the post-reform cohort parallel with the incidence of VTE, suggesting a “you can’t find what you don’t look for” effect.

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REFERENCES

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