## Surgeon Variation in Arthroscopic Treating for Acetabular Labral Tears

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INTRODUCTION: Amidst mounting pressure to reduce health care spending, strategies for identifying and eliminating unwarranted variation in costs have garnered significant attention. Inter-surgeon cost variation remains unexplored in the context of hip arthroscopy, despite its growing utilization. Thus the purpose of the present study is to (1) characterize variation in the cost of hip arthroscopy between surgeons using time-driven activity-based costing (TDABC) and (2) identify patient demographics, intraoperative findings, and operative procedures underlying such variation in costs.

METHODS: Employing TDABC, we measured the intraoperative cost of 890 outpatient hip arthroscopy cases performed by five surgeons at four singleinstitution surgery centers from 2015-2022. Costs were normalized to protect confidentiality. Surgeon-specific mean costs were calculated with and without adjustment for patient characteristics, surgical personnel, operative factors, and surgery center. Additionally, we estimated the proportion of inter-surgeon variation attributable to different cost subcategories, including labor, implant/allograft, and other supply costs.

RESULTS SECTION: The normalized intraoperative cost per patient ranged from 38.2 to 212.8, with a 1.6-fold variation in the average cost between the highest and lowest cost surgeons. Operating surgeon alone explained 53.4% of the observed variation in costs. Controlling for case-specific features significantly improved explanatory power to 91.8% (p <0.001), yet the adjusted variation in costs between surgeons remained essentially unchanged (decreased by <3%). Each of the five surgeons generated costs that deviated significantly from those predicted based on case-specific factors, with mean surgeon deviations ranging from -5.0% to 21.8% (p<0.001 for all). Drivers of cost variation differed between surgeons but generally stemmed from labor or "other" supply costs, rather than implant/allograft expenditures.

DISCUSSION: The cost of outpatient hip arthroscopy varies widely between surgeons. While within-surgeon cost variation was effectively explained by patient and operative characteristics, most between-surgeon variability remained unexplained by observable factors. These insights may support cost reduction efforts and facilitate better alignment of reimbursement rates with costs.

SIGNIFICANCE/CLINICAL RELEVANCE: By incorporating TDABC analysis to assess inter-surgeon cost variation, the present study helps to identify potential factors to help reduce cost and better align reimbursement rates within hip arthroscopy.

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## IMAGES AND TABLES:

Variable	Mean (SD) or No. (%) 2019.6 (1.9)	Capsule management	Mean (SD) or No. (%)	Table 3. Multivariable linear regression evaluating inter-surgeon variation in costs, controlling for relevant patient and case-specific characteristics						
Year				Variable	Mean difference -	95% CI		- Pvalue*		
Age	37.1 (12.7) Interportal capsulotomy with repair		259 (29.1)	v arrabic	Mean dinerence -	Lower	Upper	- I value		
Body mass index (kg/m²) Gender	26.6 (4.7)	Interportal capsulotomy without repair	120 (13.5)	Patient characteristics						
Female	515 (57.9)	T-capsulotomy with repair T-capsulotomy without repair	206 (23.1) 8 (0.9)	Age, per 1-year increase	-0.09	-0.16	-0.01	0.022		
Male	375 (42.1)	Puncture capsulotomy	297 (33.4)							
Race	373 (42.1)	BMAC or microfracture	243 (27.3)	Male gender	4.51	2.64	6.38	< 0.001		
Asian	23 (2.6)	Labral tear size (degrees)	74.8 (21.9)	Beck classification of labral damage, per 1-unit increase	4.05	2.82	5.29	< 0.001		
Black or African American	22 (2.5)	Beck classification of labral damage	74.0 (21.5)	Operative year, per 1-year increase	1.02	0.44	1.60	< 0.001		
White	806 (90.6)	Normal	5 (0.6)	Surgical personnel <sup>†</sup>						
Other	21 (2.4)	Degeneration	311 (34.9)							
Unavailable	18 (2.0)	Full-thickness tear	374 (42.0)	Resident assistant	2.96	0.08	5.84	<0.001		
Ethnicity		Detachment	191 (21.5)	Fellow assistant	4.22	0.69	7.75			
Hispanic or Latino	34 (3.8)	Ossification	9(1.0)	Physician's assistant	2.26	-1.12	5.63			
Not Hispanic or Latino	831 (93.4)	Number of suture anchors		Multiple assistants	10.80	6.26	15.35			
Unavailable	25 (2.8)	0-2	253 (28.4)	Operative factors	10.00	0.20	10.00			
ASA score		3	432 (48.5)	•						
1	380 (42.7)	5-7	143 (16.1) 62 (7.0)	A cetabulop lasty <sup>‡</sup>	5.26	1.21	9.32	< 0.001		
2	476 (53.5) 34 (3.8)	Surgeon	62 (7.0)	Femoroplasty <sup>‡</sup>	7.45	3.09	11.81			
Previous ipsilateral surgery	30 (3.4)	Surgeon #1	297 (33.4)	Femoral acetabuloplasty <sup>‡</sup>	12.57	8.34	16.80			
Previous contralateral surgery	85 (9.6)	Surgeon #2	275 (30.9)	Labral debridement <sup>§</sup>	-27.31	-30.82	-23.79			
Osteoplasty type	00 (7.0)	Surgeon #3	231 (26.0)					<0.001		
Acetabuloplasty	162 (18.2)	Surgeon #4	52 (5.8)	Labral reconstruction§	50.59	44.57	56.61			
Femoroplasty	224 (25.2)	Surgeon #5	35 (3.9)	Interportal capsulotomy without repair	0.20	-4.84	5.25			
Combined	407 (45.7)	Surgery center		T-capsulotomy with repair	4.17	-0.92	9.25			
None	97 (10.9)	Surgery center A	366 (41.1)			-12.98	8.38	0.117		
Labrum procedure		Surgery center B	254 (28.5)		-23.00	-67.21	21.21			
Debridement	84 (9.4)	Surgery center C	177 (19.9)	Puncture capsulotomy						
Repair	521 (58.5)	Surgery center D	93 (10.4)	BMAC or microfracture	14.57	11.33	17.82	< 0.001		
Augmentation	266 (29.9)			*P values calculated using likelihood-ratio tests. *Reference: no assis	stant. <sup>2</sup> Reference: no oste	eoplasty. §Refer	rence: labral rep	air (with or		
Reconstruction  *Data presented as mean (standard de	19 (2.1)			without capsular augmentation). Reference: interportal capsulotomy	mist made 75 in model	den induded .		4		

Table 2. Normalized cost and time estimates for outparent inp artificiscopy, strained by operating surgeon-												
Variable	Study average	Surgeon #1	Surgeon #2	Surgeon #3	Surgeon #4	Surgeon #5	P value					
Total cost	100.0 (98.3, 101.7)	96.1 (93.9, 98.2)	81.5 (78.9, 84.0)	122.3 (119.8, 124.8)	130.1 (123.8, 136.5)	87.0 (80.0, 94.0)	<0.001					
Labor cost	46.8 (45.9, 47.7)	50.4 (49.4, 51.4)	33.7 (32.8, 34.6)	52.5 (51.4, 53.7)	73.6 (70.3, 77.0)	41.2 (39.0, 43.5)	<0.001					
Supply cost	53.2 (52.1, 54.4)	45.7 (44.1, 47.2)	47.8 (45.8, 49.7)	69.7 (68.1, 71.3)	56.5 (52.6, 60.4)	45.7 (39.6, 51.9)	<0.001					
Implant and/or allograft costs	17.2 (16.5, 17.8)	14.6 (14.1, 15.1)	19.6 (18.1, 21.1)	16.2 (14.8, 17.5)	20.3 (17.7, 22.9)	21.6 (18.2, 25.1)	<0.001					
Other/disposables costs	36.1 (35.1, 37.0)	31.1 (29.8, 32.4)	28.2 (27.2, 29.1)	53.6 (52.9, 54.2)	36.2 (33.2, 39.2)	24.1 (19.4, 28.8)	<0.001					
Time in operating room	171.7 (168.1, 175.3)	185.3 (181.3, 189.3)	118.2 (114.6, 121.7)	196.7 (191.8, 201.5)	278.5 (265.3, 291.7)	154.0 (145.2, 162.7)	<0.001					
Time from incision to closure	110.9 (107.9, 113.8)	117.2 (113.6, 120.7)	76.1 (72.8, 79.4)	124.6 (120.1, 129.2)	209.3 (197.7, 220.9)	92.8 (84.7, 101.0)	<0.001					

Abbreviations: BMAC, bone marrow aspirate concentrate

<sup>\*</sup>Data presented as average normalized cost or average minutes (95% confidence interval). Boldface denotes statistical significance