



## IMPORTANT

### Medicare Payments for Total Knee Replacements

In 2018, Medicare changed the way it classifies total knee replacement surgeries, which may affect your payment. Depending on your length of stay in the hospital after your surgery, your surgery may be covered under Observational Status or Inpatient Status by Medicare. If it is covered under Observational Status, it will be billed to Medicare Part B and then your secondary insurance. Depending on your coverage, your out-of-pocket expense for coverage under Observational Status may be higher than coverage under Inpatient Status.

At ChristianaCare, our goal is for you to have a successful surgery and recovery with an understanding of your discharge plan and payment expectations. Please read the information below to help you understand what this means for you, and what steps you can take before your surgery.

#### ***What do Observation Status and Inpatient Status mean, and why is this important?***

The difference between Inpatient and Observation status is important because Observation Status may result in a higher out-of-pocket cost to you depending on your specific benefits.

Patients admitted under Observation status are considered outpatients, even though they may stay in the hospital for several days and receive treatment in a hospital bed.

Observation Status services are billed to Medicare Part B and then your secondary insurance, if you have it.

For more information on Medicare's definition of Observation status, visit Medicare's [webpage on how inpatient and outpatient status affect hospital costs](#).

***If I'm in Observation Status, can I request to stay in the hospital longer?***

No, your surgeon must discharge you from the hospital when you are medically stable. Medicare does not allow your care team to extend your stay for any reasons not directly related to your medical needs.

***What if I have secondary insurance?***

If you have a secondary insurance plan, your Medicare copay may be covered under that plan. Please call the number on your secondary insurance plan card to speak with a representative about any copay you may have for your knee replacement surgery.

***What if I don't have secondary insurance?***

If you do not have a secondary insurance plan and would like to have an estimate of your Medicare copay prior to surgery, please call the ChristianaCare Financial Assistance Department at 302-623-7440, and a representative will answer your questions and can advise you on your expected copayment.

***How long do patients generally stay in the hospital after a total knee replacement?***

Most patients are discharged to home the day after a total knee replacement surgery.

***Does Medicare cover the cost of a skilled nursing facility after my surgery?***

Medicare covers the cost of a skilled nursing facility only if the patient has a qualifying inpatient admission of at least three days in a row. Total knee replacement surgery typically does not require a three-day stay.

***I have additional questions. Who can I call?***

If you have questions related to your insurance and copay, please call your insurance provider or ChristianaCare's Financial Assistance Department at 302-623-7440. If you have questions about your surgery, please contact your surgeon's office. You can also find information at [www.christianacare.org/joint](http://www.christianacare.org/joint).