Hernia Coding Changes: Impact on Surgeon Productivity

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Purpose

- Determine actual 2022 vs. expected 2023 productivity for ventral hernia repair (VHR) using old vs. new current procedural terminology (CPT) codes

Methods

- Single institution retrospective review
- Assumption
  - Case type and volume is consistent 2022-2023
- Inclusion
  - All VHR cases (2022)
- Exclusion
  - Concomitant procedures and/or incorrect coding
- Analyzed per annum and case differences of actual (2022) and expected (2023) wRUV based on old and new CPT codes, respectively

Results

- 2022 cohort
  - 51 VHR operations
  - 1565.5 total wRVU
- 2023 cohort
  - 51 identical VHR operations
  - 1474.4 total wRVU

Conclusions

- New hernia CPT codes decrease average wRVU per case by 5.8%
- Annual wRVU targets should be decreased accordingly by employers

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