

An Analysis of US Urologists Performing Outpatient-Based Inflatable Penile Prosthesis Implantation

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BACKGROUND

- Inflatable penile prosthesis (IPP) implantation is a definitive treatment for men with erectile dysfunction (ED).
- Few urologists receive IPP procedure instruction and experience during a fellowship or residency, potentially limiting patient access to IPP care.

OBJECTIVE

- To explore the recent US administrative claims data of IPP implanters to better understand IPP practices.

METHODS

- This study used administrative claims data from Definitive Healthcare to identify implanters who performed IPP (Current Procedural Terminology® [CPT] 54405) in hospital outpatient settings on a sample of patients with commercial insurance or Medicare in 2021.
- The number of IPP procedures performed by each implanter was calculated by summing the implant claim volume performed on commercially-insured and Medicare patients.
- Less than 11 Medicare procedures performed by any individual implanter were defaulted with a procedure volume of 10 due to CMS privacy requirements.
- A geographical analysis was conducted using each implanter's primary affiliated hospital to identify the US state in which each implanter performed their IPP procedures.

RESULTS

- In 2021, 21,835 outpatient-based IPP procedures were performed to a representative sample of commercially insured and Medicare patients.
- The IPP procedures were performed by 2,049 urologists, equivalent to approximately 10.7 procedures per implanter per year.
- The IPP volumes were right skewed:
 - 8.6% of urologists performed 33.7% of IPP procedure volume annually.
 - 91.4% of urologists performed less than 20 IPP cases (Figure 1).
 - The top implanters who performed more than 100 IPP cases accounted for 6.3% of the procedure volumes.

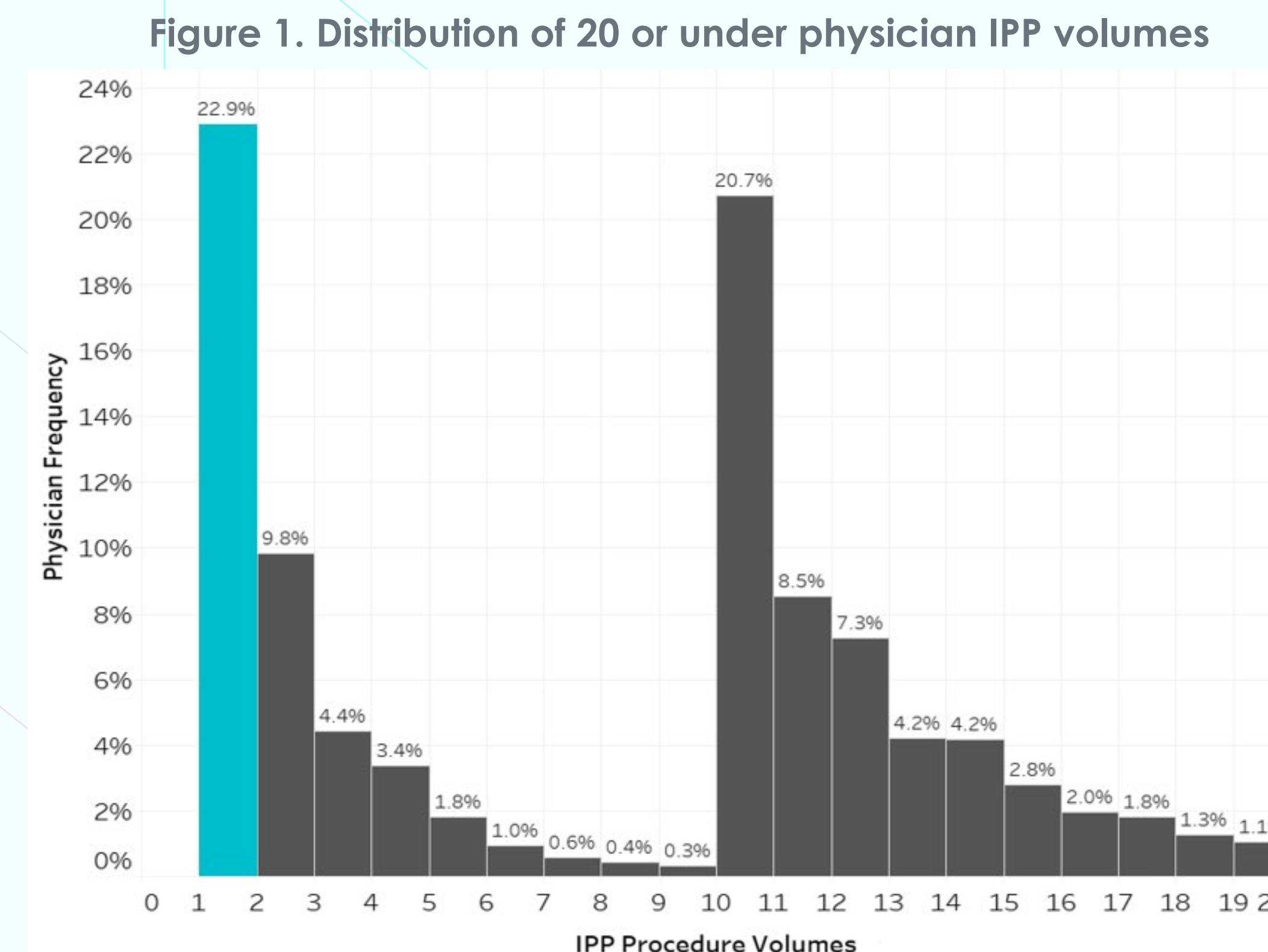
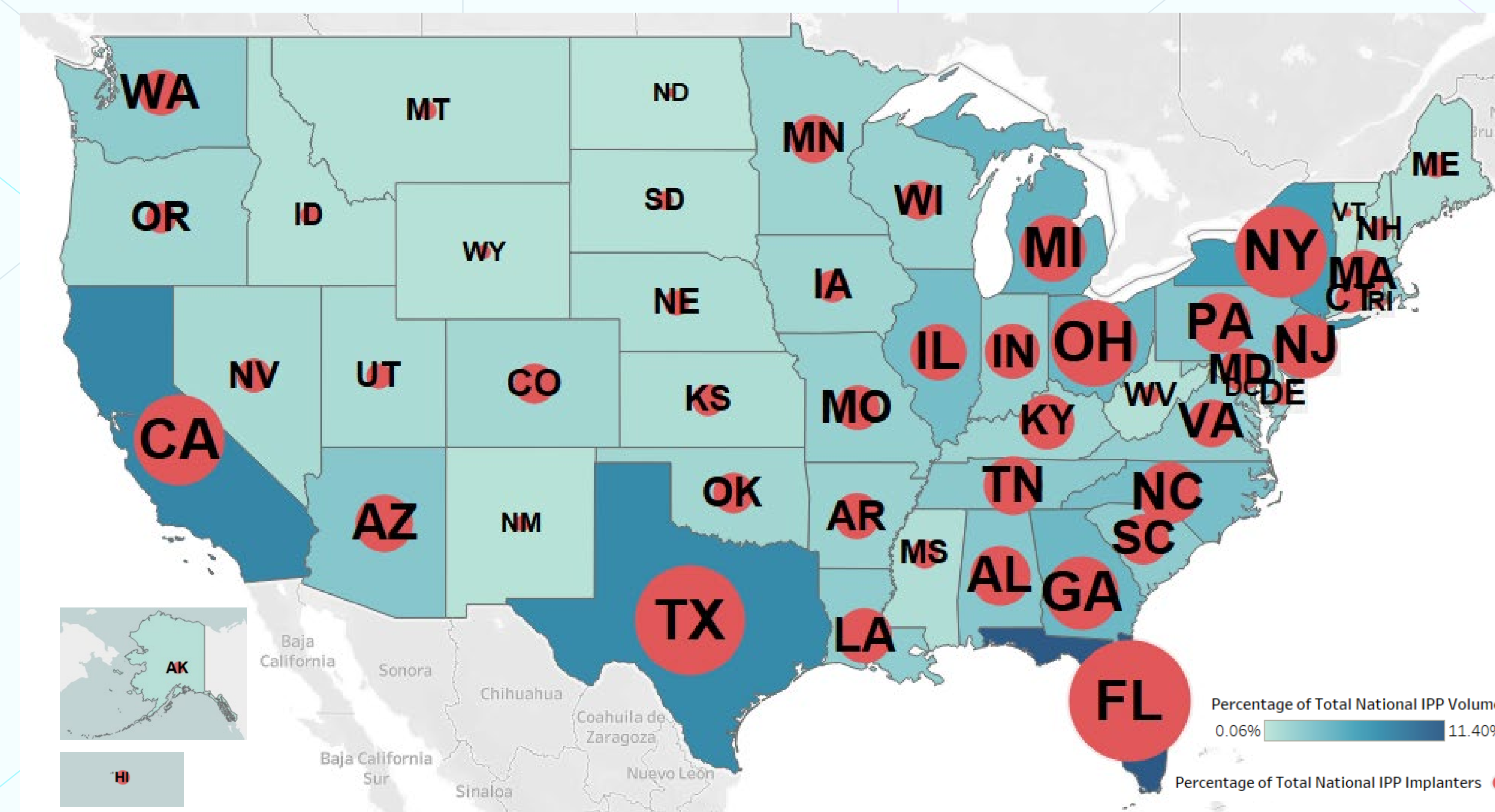


Figure 2. States with highest numbers of IPP implanters and IPP procedure volume



- A geographical analysis found Florida (11.2%), California (7.8%), Texas (7.5%), New York (5.9%), Michigan (4.2%), Ohio (3.9%), and Georgia (3.9%) had the highest numbers of IPP implanters.
- These findings are consistent with the top seven states with the highest IPP volume (Florida [11.4%], Texas [9.4%], New York [6.5%], California [6.3%], Ohio [5.8%], Georgia [4.2%], and Michigan [3.4%]) (Figure 2).

CONCLUSIONS

- A majority of IPP implanters performed less than 20 outpatient-based IPP procedures in a given year.
- Given that less than 10% of more than one third of IPP procedure volume annually, IPP with features designed to reduce patient training visits could help implanters become more efficient in treating their patients.

LIMITATIONS

- This study exclusively used 2021 hospital outpatient claims data with Commercial insurance and Medicare.
- The commercial claims data referenced in this study is sourced from multiple medical claims clearinghouses in the United States. They represent a majority but not all Commercial claims.
- Less than 11 Medicare procedures performed by any individual implanter were defaulted with a procedure volume of 10.

DISCLOSURES

- For Medicare claims ONLY, all datapoints with fewer than 11 claims/procedures are defaulted with 10 due to CMS privacy requirements.
- This study was funded by Boston Scientific. Kathryn Durand and Sirikan Rojanasart are full-time employees of Boston Scientific.