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Authors

Roster, Katie
Islam, Sumaiya
Feroz, Farhha
et al.

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A cross-sectional analysis of insurance acceptance among Mohs micrographic surgeons in New York City

Katie Roster¹ MS, Sumaiya Islam² BA, Farhha Feroz² BA, Shelcie Fabre² MS, Zahidul Islam² BA, Abigail Cline² MD, Shari R Lipner³ MD PhD

Affiliations: ¹Department of Dermatology, Georgetown University School of Medicine, Medstar Washington Hospital Center, Washington, District of Columbia, USA, ²New York Medical College, New York, New York, USA, ³Department of Dermatology, Weill Cornell Medicine, New York, New York, USA

Corresponding Author: Shari R Lipner MD PhD, Department of Dermatology, Weill Cornell Medicine, 1305 York Avenue, 9th Floor, New York, NY 10021, Tel: 646-962-3376, Email: shl9032@med.cornell.edu

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To the Editor:

In a 2022 cross-sectional analysis of Mohs micrographic surgeons (MMS) in the United States, Medicaid acceptance was lower in metropolitan versus nonmetropolitan areas (38.4% versus 57.2%, $P < 0.001$), [1]. Since factors influencing insurance acceptance rates within urban settings are not well characterized, our objective was to examine MMS health insurance acceptance rates and practice characteristics in New York City (NYC).

In December 2022, a comprehensive list of MMS practicing in NYC was compiled using the American Academy of Dermatology "find a dermatologist" tool, American College of Mohs Surgery "find a surgeon" tools, and Centers for Medicare & Medicaid Services 2020 dataset. Mohs micrographic surgeons were verified using academic/hospital websites and practice phone calls. In addition to utilizing the above databases, the Medicare Physician & Other Practitioner Look-up tool was used for insurance acceptance. Statistical analysis was performed using t-tests and chi-square tests via SPSS.

We identified 96 Mohs surgeons practicing in NYC. Of these, 92.8% of MMS accepted private insurance, 64.6% accepted Medicare, and 14.6% accepted Medicaid. Medicaid acceptance was highest in the Bronx (100%), followed by Manhattan and Staten Island (both 14.3%). Medicare was accepted by 78.0% MMS at academic institutions, 56.8% in private

clinics, and 45.5% in multi-specialty clinics ($P = 0.043$). Medicaid was accepted at 26.8% in academic settings, 18.2% in multi-specialty clinics, and 2.3% in private clinics ($P = 0.002$). Insurance acceptance was not associated with physician gender, experience, practice location, or number of practices ($P > 0.05$), (**Table 1**).

A strikingly lower Medicaid acceptance rate ($< 15\%$) was seen when compared to the 2022 MMS cross-sectional study [1]. This difference may relate to their inclusion of MMS from the 2017-2020 fellowship graduate list and surgeons who filed Medicare claims, possibly inflating Medicaid acceptance rates. Like our findings, a retrospective study across 13 urban areas found that 19% of pediatric dermatologists accepted Medicaid [2]. Similarly, a 2004-2022 survey of 77 NYC dermatologists conducted reported an 18.2% Medicaid acceptance [3]. According to the 2021 Kaiser Family Foundation American Community Survey, nearly 28% of NY residents rely on Medicaid for health insurance. Therefore, our findings highlight a substantial gap in access to Mohs surgery.

Academic institutions had higher Medicare and Medicaid acceptance rates compared to private and multi-specialty clinics, likely because of accreditation requirements and higher reimbursement rates. In a 2010-2016 cross-sectional analysis of Medicare

Table 1. Private insurance, Medicare, and Medicaid acceptance of New York Mohs Micrographic Surgeons by physician and practice characteristics.

		Private insurance providers ^c		Medicare accepted	Medicaid accepted	No insurance accepted
		<3	>8			
All Mohs surgeons, N=96		19 (19.8)	20 (20.8)	62 (64.6)	14 (14.6)	7 (7.3)
Gender, N (%)						
Male	55 (57.3)	8 (19.5)	11 (20.0)	38 (69.1)	10 (18.2)	2 (8.3)
Female	41 (42.7)	11 (20.0)	9 (22.0)	24 (58.5)	4 (9.8)	5 (27.8)
Years of experience, N (%)						
<15	41 (42.7)	8 (22.9)	4 (11.4)	26 (74.3)	5 (14.3)	3 (16.7)
15-30	11 (11.5)	5 (10.9)	14 (30.4)	31 (67.4)	8 (17.4)	1 (5.9)
>30	44 (45.8)	6 (40.0)	7 (46.7)	5 (33.3)	1 (6.7)	3 (42.9)
Practice setting, N (%)						
Academic affiliation	41 (42.7)	6 (14.6)	5 (12.2)	32 (78.0) ^a	11 (26.8) ^b	2 (12.5)
Multispecialty	11 (11.5)	2 (18.2)	5 (45.5)	5 (45.5) ^a	2 (18.2) ^b	0 (0.0)
Private Practice	44 (45.8)	11 (25.0)	10 (22.7)	25 (56.8) ^a	1 (2.3) ^b	5 (23.8)
Location, N (%)						
Bronx	7 (7.3)	1 (14.3)	2 (28.6)	2 (28.6)	7 (100.0)	0 (0.0)
Brooklyn	16 (16.7)	4 (25.0)	4 (25.0)	12 (75.0)	2 (12.5)	1 (6.3)
New York	63 (65.6)	14 (22.2)	11 (17.5)	44 (69.8)	9 (14.3)	6 (27.3)
Queens	3 (3.1)	0 (0.0)	0 (0.0)	2 (66.7)	0 (0.0)	0 (0.0)
Staten Island	7 (7.3)	0 (0.0)	3 (42.9)	2 (28.6)	1 (14.3)	0 (0.0)
Multiple practices, N (%)	24 (25.0)	5 (20.8)	6 (25.0)	14 (58.3)	5 (20.8)	2 (8.3)

^aIndicates statistically significant values with a P<0.05.

^bIndicates statistically significant values with a P<0.01.

^cPrivate insurance providers were categorized as follows: Excellus, Kaiser, Capital District Physicians' Health Plan, Oscar, Fidelis, Healthfirst, MVP Health Care, Anthem, Humana, Multiplan, Emblem Health/Health Insurance Plan of Greater New York, Empire, United Healthcare, Medicare, Blue Cross/Blue Shield, Cigna, Aetna.

reimbursement for physician services, physicians integrated within a hospital system received \$114,000 more than non-integrated physicians [4]. Nearly all MMS accepted private insurance, possibly because of higher reimbursement rates. Private insurers reimbursed medical expenses at 143% of Medicare rates, in a 2020 review of 19 studies [5]. Medicaid was accepted at higher rates in lower versus higher cost-of-living areas, such as the Bronx, which merits further study.

Limitations include singular geography and relatively small sample size. Future research should investigate factors contributing to MMS insurance

acceptance, particularly Medicaid. Overall, our study highlights remarkably low Medicaid acceptance rates among MMS in NYC. Augmenting Medicaid reimbursement rates to bring them closer to those of private insurance rates, particularly within private and multispecialty clinics in high cost-of-living areas, might increase access to MMS.

Potential conflicts of interest

Shari R Lipner has served as a consultant for Hoth Therapeutics, Ortho Dermatologics, Moberg Pharmaceuticals, and Belle Torus Corporation. The remaining authors declare no conflicts of interest.

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