

ROTATOR CUFF SURGERIES: TRENDS, BEST PRACTICES, AND CONSERVATIVE CARE



FOREWORD

Rotator cuff injuries are common. Surgeries to fix them? Even more so. But as the numbers rise, it's time to ask a hard question: Are we always doing what's best for the patient?

This white paper isn't anti-surgery—it's pro-smart care. Dr. Harbinder Chada and Dr. Rahul Singal draw on clinical expertise, WNS-HealthHelp's detailed clinical guidelines, and national data to examine what's working, what isn't, and where we have opportunities to do better. For providers, that means reassessing when surgery makes sense and when a conservative approach can lead to better outcomes, shorter recovery, and fewer complications. For health plans, it's a chance to align care decisions with what actually improves patients' lives. Patients don't want procedures—they want relief, function, and trust in their care.

As we highlight in following article, a large number of rotator cuff surgeries may be avoidable without compromising outcomes. In many cases, physical therapy, done correctly, can deliver lasting results with less cost, risk, and disruption.

Better patient experiences don't always require more intervention—they require better judgment, shared decision-making, and transparency in care planning. Let's put patients at the center and rethink the path to better musculoskeletal health.

AUTHORS



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"The best care isn't always the most aggressive — it's the most appropriate. Our goal is to guide decisions that restore function, not just repair tissue."

- Dr. Harbinder Chada



Rahul Singal, MD
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"Surgery should be a solution, not a starting point. When we prioritize patient goals over procedural habits, we uncover better outcomes—with fewer risks."

- Dr. Rahul Singal

ROTATOR CUFF SURGERY OVERVIEW

Musculoskeletal (MSK) conditions continue to be a leading cause of pain, disability, and overall healthcare costs. Amongst the commercial adult insured population, shoulder issues and particularly rotator cuff surgeries has continued to increase. A study published in 2021 showed a 20% increase in surgeries over a 10-year period for the population aged 50 = 64. However, emerging research and evolving clinical guidelines suggest that surgery is not always the best option. The American Academy of Orthopedic Surgeons (AAOS) has notably shifted toward a more conservative approach over the past decade, advocating for non-invasive treatments before considering surgery.

The rotator cuff is a group of muscles and tendons that stabilize the shoulder and enable movement. Injuries range from mild tendonitis to full-thickness tears, often caused by repetitive motion, aging, or acute trauma. Common conditions include:

Rotator Cuff Tendonitis

Inflammation of the tendons due to overuse.

Partial-Thickness Tear

Damage that does not completely sever the tendon.

Full-Thickness Tear

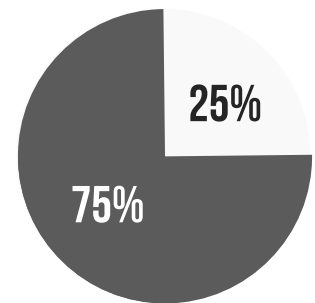
A complete tear in one of the tendons.

INSIGHTS AND EXPERT STUDY

The Multicenter Orthopaedic Outcomes Network (MOON) Shoulder Group (www.moonshoulder.com), a collaborative research network comprised of 16 academic medical centers nationwide, has provided valuable insights into the effectiveness of conservative care for rotator cuff injuries.

A 10-year study demonstrated that physical therapy (PT) is a highly effective option for treating atraumatic rotator cuff tears. The study tracked 452 patients with full-thickness tears and found that non-operative treatment was successful for approximately 75% of patients. These patients experienced significant pain relief and functional improvement without requiring surgery.

For the remaining 25% who did not respond to PT, surgery was recommended. Interestingly, many of these patients who initially declined surgery eventually improved through continued conservative care. This underscores the importance of exploring non-invasive options before resorting to surgical intervention.



Out of 452 MSK patients, non-operative treatment was successful for 75% of patients.

IS SURGERY WORTH IT?

In addition to the MOON study, a growing body of clinical research indicates that long-term functional outcomes for rotator cuff injuries are comparable whether managed surgically or non-surgically. Many patients who opt for conservative treatment, including physical therapy and injections, experience similar pain relief and functional improvement a decade later. This raises important questions about the necessity of surgery in cases where non-invasive options are viable.

CONCERNING SURGICAL TREND - “MIGHT AS WELL FIX IT” APPROACH

One concerning trend within orthopedic surgery is the practice of performing additional, potentially unnecessary procedures while treating a related condition. This is particularly relevant in shoulder surgeries.

For example, a patient diagnosed with shoulder instability on both physical exam and MRI may require labrum repair. If the surgeon identifies a partial tear in the rotator cuff tendons during the procedure some surgeons opt to “clean it up” and bill for an additional procedure. While seemingly minor, these “drive-by” procedures can contribute to excessive medical costs, unnecessary interventions, prolonged physical therapy, and dubious outcome improvement. Surgeons may take advantage of coding loopholes to bill under prior approved surgeries leading to increased costs.

OPTIMAL CANDIDATE FOR SURGERY

Ideal candidates for a surgery who are not successful in PT can include those with:

- Acute traumatic tears.
- Significant loss of function and strength.
- Failure to improve with physical therapy over 6–12 months.

Conversely, patients with underlying conditions such as smoking, obesity, or diabetes often experience poor surgical outcomes. These factors can impair healing, increase infection risk, and contribute to recurrent tears.

Surgical Pros

- Can restore shoulder function in severe cases.
- Pain relief for patients who do not respond to conservative physical therapy treatment.
- Advances in arthroscopic surgery have improved recovery times.

Surgical Cons

- Requires lengthy rehabilitation and physical therapy.
- Success rates vary depending on patient health and age.
- Studies show no significant difference in functional outcomes 10 years post-surgery compared to non-surgical treatment.

For those who do are good candidates for surgery, certain prehabilitation strategies can also optimize recovery, including:

- Strengthening surrounding muscles through physical therapy.
- Maintaining a healthy weight and controlling blood sugar levels.
- Smoking cessation to improve tissue healing.

WNS-HEALTHHELP BY THE NUMBERS

WNS-HealthHelp clinical findings **20%** of rotator cuff surgeries submitted were avoidable.

After collaboration and detailed discussions with providers on those cases:

50% of authorizations were withdrawn by the provider

50% of authorizations were converted to a less invasive treatment

CONCLUSION - MOVING TOWARD SMARTER MSK CARE

The shift toward conservative care in rotator cuff treatment is part of a larger effort to reduce unnecessary surgeries and improve patient outcomes. Best practices in MSK management include:

- Prioritizing evidence-based non-surgical treatments.
- Addressing lifestyle factors that impact surgical success.
- Ensuring patients meet clear criteria before surgery.
- Encouraging transparency in surgical billing practices.

As MSK care continues to evolve, both patients and providers must critically assess the necessity of surgery and explore all available options before proceeding with invasive interventions. A patient-centered, conservative-first approach may ultimately yield the best long-term results while reducing healthcare costs and improving overall quality of care.

About WNS-HealthHelp

HealthHelp, a unit within WNS, is a trusted healthcare technology platform for health plans' clinical programs for over 25 years. Our unified suite of Advanced AI powered technology platform-based solutions simplifies medical complexity and workforce challenges, and enhances provider relations and member (i.e., customer experience) journeys. Our industry leading utilization management and clinical solutions were developed to fit into health plans' existing clinical programs to achieve critical business outcomes. We work in partnership to understand health plan commercial and Medicare clinical programs, and determine where our solutions can advance outcomes and lower cost. There is no one size fits all, and we know how to build the best tailored solution cost effectively for a specific health plan's needs.

Advanced AI Clinical Engine + Proactive Collaboration + Not Health Plan Owned