

Rising Medicare Opt-Out Among Orthopedic Surgeons Driven By Experience, Practice Management, and Geography

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INTRODUCTION: Medicare reimbursement cuts and increasing administrative burdens have contributed to a growing number of physicians opting out of the program, with orthopedic surgeons disproportionately affected due to their patient population, procedural volume, and operational costs. Therefore, this study aimed to analyze (1) trends in the incidence of orthopedic surgeons opting out of Medicare, (2) the demographic and professional characteristics of those opting out, (3) the geographic distribution of opt-outs, and (4) provider characteristics associated with the timing of opt-outs among orthopedic surgeons.

METHODS:

This cross-sectional study analyzed historical data reported from the CMS Opt-Out Affidavit and the AAOS census databases. By matching National Provider Identifier, additional data on surgeon demographics, career stage, subspecialty, and practice type were extracted from publicly available professional profiles to assess factors influencing opt-out.

RESULTS: The incidence of Medicare opt-outs among orthopedic surgeons has risen steadily over the past two decades, totaling n=311 ($R^2 = 0.64$, $p < 0.001$). Opt-outs were highest among surgeons having more than 30 years of experience (49.5%, 95% CI: 43.8-55.2%). Highest opt-out rates were observed in New York (5.51%) and New Jersey (4.12%) when adjusted by the orthopedic surgeon population. For a given surgeon, the strongest predictors of earlier Medicare opt-out year included the years of practice (-0.14, 95% CI: -0.18 to -0.10) and practice type, with group practice surgeons opting out earlier (-1.93, 95% CI: -3.12 to -0.74).

DISCUSSION AND CONCLUSION: The increasing trend of Medicare opt-outs among orthopedic surgeons is driven by career stage, financial sustainability concerns, and practice management dynamics. Addressing declining reimbursement rates and administrative burdens is critical to ensuring continued Medicare participation and preserving patient access to specialized care.

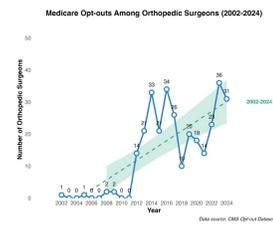


Figure 2. Incidence of Medicare Opt-Outs Among Orthopedic Surgeons (2004-2024)

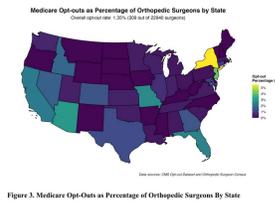


Figure 3. Medicare Opt-Outs as Percentage of Orthopedic Surgeons By State

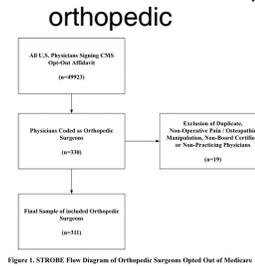


Figure 1. STROBE Flow Diagram of Orthopedic Surgeons Opted Out of Medicare

Category	N (%)	95% CI
Total Opted Out	311 (100%)	
Mean Years In Practice	29.2	27.9-30.5
Years In Practice		
≥ 30 years	154 (49.5%)	43.8-55.2%
20-29 years	87 (28.0%)	23.1-33.4%
10-19 years	66 (19.3%)	15.1-24.2%
< 10 years	10 (3.2%)	1.6-6.0%
Subspecialty		
Spine	103 (33.1%)	28.0-38.7%
Spine Medicine	72 (23.2%)	18.7-28.3%
General	49 (15.8%)	12.0-20.4%
Total Joint and Adult Reconstruction	46 (14.8%)	11.1-19.3%
Foot and Ankle	16 (5.1%)	3.1-8.4%
Hand and Upper Extremity	10 (3.2%)	1.8-4.4%
Pediatrics	11 (3.5%)	2.2-5.0%
Shoulder and Elbow	3 (1.0%)	0.2-3.0%
Limbs Lengthening and Reconstruction	2 (0.6%)	0.1-2.0%
Trauma	1 (0.3%)	0.0-1.1%
Oncology	0 (0.0%)	-
Practice Type		
Academic Medical Center	92 (29.6%)	24.6-35.0%
Group Practice	81 (27.3%)	22.5-32.7%
Independent Practice	81 (26.0%)	21.3-31.4%
Community Hospital	53 (17.0%)	13.1-21.8%
Sex		
Male	286 (92.3%)	89.0-97.2%
Female	15 (4.8%)	2.8-8.0%