# Orthopedic Surgeons Opting Out of Medicare: A National Descriptive Analysis

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INTRODUCTION: Medicare insures roughly 20% of the U.S. population and serves as a predominant financier for orthopedic services. Participation in Medicare remains a topic of debate, largely due to perceived low reimbursement rates and regulatory burdens. However, despite these concerns, most physicians continue to participate in Medicare. The Centers for Medicare and Medicaid Services (CMS) reports 1.51% of orthopedic surgeons opted out of Medicare between 2010 and 2024, a rate lower than that of neurosurgeons (1.63%) and plastic and reconstructive surgeons (9.52%). Analysis of other specialties, such as neurosurgery and dermatology, suggest that opt-outs are related to the following factors: physician experience, practice type, and location. However, such patterns have not been examined specifically among orthopedic surgeons.

METHODS: The Centers for Medicare and Medicaid Services (CMS) publishes an annual, public dataset providing information on providers who opt-out of Medicare. Of these providers, 321 were identified as “Orthopedic Surgery” and extracted for a cross-sectional analysis. Once identified, the CMS Open Payments database was consulted to identify industry payments received by each provider. Surgeon characteristics (such as surgical subspecialty, type of practice, geographic location, medical school graduation year, and when opt-out went into effect) were analyzed using descriptive statistics and chi-square tests to examine associations in orthopedic Medicare non-participation.

RESULTS:

A total of 321 orthopedic surgeons opted-out of Medicare between 2010 and 2024. The proportion of opt-outs varied significantly by subspecialty (p<.001), with the highest opt-out rates including spine surgery (33.3%) and sports medicine (32.3%), while limb lengthening and reconstruction (0.6%) reported the lowest opt-out rates. Most surgeons who opt-out practice in private settings (74.5%), which was significantly higher than academic (16.5%) and public (9.0%) practice (p<.001). Geographically, opt-outs were most concentrated in New York (24.9%), California (18.1%), and Florida (11.2%) (p<.001).

Within the sample, 288 providers received documented industry payments with a median amount of $13,440.47 (IQR: $1,133.64 - $274,099.7) per surgeon.

Opt-outs were not distributed evenly by year (p< .001), with notable peaks occurring in 2016 (36 opt-outs) and 2023 (33 opt-outs). Medical school graduation decade was also significantly associated with Medicare opt-out in orthopedics (p< .001). Specifically, surgeons graduated in the 1980s and 1990s were overrepresented while those graduated in the 2010s–2020s were underrepresented.

DISCUSSION AND CONCLUSION:

Though opt-out rates remain relatively low across all specialties, including orthopedic surgery, there are notable variations in type of practice, geography, and subspecialty. These analyses suggest that withdrawal from Medicare may be influenced by outside societal and financial factors. Future investigation is necessary to elucidate potential impacts on patient care and equity in orthopedic surgery.

| Variable | N (%) |
|---|---|
| Practice Type | |
| Private | 239 (74.5) |
| Academic | 53 (16.5) |
| Public | 29 (9.0) |
| Top States | |
| New York | 80 (24.9) |
| California | 58 (18.1) |
| Florida | 36 (11.2) |
| Other | 147 (45.8) |
| Subspecialty | |
| Spine Surgery | 107 (33.3) |
| Sports Medicine | 105 (32.7) |
| Hip and Knee | 38 (11.8) |
| General | 19 (5.9) |
| Not specified | 18 (5.6) |
| Hand | 11 (3.4) |
| Foot and Ankle | 9 (2.8) |
| Hand and Upper Extremity | 4 (1.2) |
| Total joint reconstruction/replacement | 4 (1.2) |
| Pediatric | 3 (0.9) |
| Limb lengthening and reconstruction | 2 (0.6) |
| Sports Medicine + Hip and Knee | 1 (0.3) |
| Opt-Outs by Year | |
| 2000s | 6 (1.9) |
| 2010s | 184 (57.3) |
| 2020s | 131 (40.8) |
| Medical School Graduation Year | |
| 1980s | 99 (30.8) |
| 1990s | 92 (28.7) |
| 2000s | 57 (17.8) |
| 1970s | 43 (13.4) |
| 1960s | 19 (5.9) |
| 2010s-2020s | 9 (2.8) |
| 1950s | 1 (0.3) |
| Missing | 1 (0.3) |
| Industry Payments | |
| Mean | $1,139,924.36 |
| 95% Confidence Interval for Mean | |
| Lower Bound | $533,732.35 |
| Upper Bound | $1,746,116.38 |