

CMS' Medicare Physician Fee Schedule and the Future of Orthopaedics

The Centers for Medicare & Medicaid Services' (CMS) calendar year 2027 Medicare Physician Fee Schedule (MPFS) proposed rule includes several policies at once that, together, represent **one of the most significant threats to independent orthopaedic practice in decades.**

Policy of Concern	Cuts of nearly 20% to the relative value units (RVUs) for total shoulder, total hip, and total knee arthroplasty services along with shoulder hemiarthroplasty.	Reducing payment for separate identifiable evaluation and management (E/M) services billed with Modifier-25 on the same day as procedures with 0-, 10-, and 90-day global periods	Removing the Indirect Practice Cost Index (IPCI) from the calculation of practice expense RVUs.
AAOS Recommends	Maintain CY 2026 work RVUs for CPT codes 23470, 23472, 27130, and 27447	Withdraw the proposed cut and work collaboratively with physicians on evidence-based payment policies	Refrain from finalizing additional practice-expense methodology changes without sufficient data and analysis of their impact on independent physician practices.

5,000+

AAOS members have sent more than 5,000 letters to Congress and CMS opposing these cuts



100+

AAOS has held more than 100 meetings with Congressional offices on the proposed rule

The combined effect is greater financial instability and increased pressure for physicians to sell their practices to hospitals and large health systems.

AAOS is taking coordinated action to protect independent practice, patient access and the future of orthopaedic care.



Learn more and get involved.