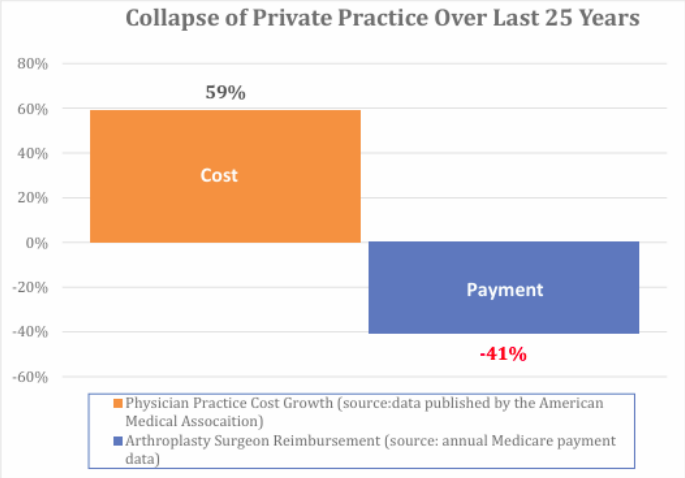
PROPOSED 2027 MEDICARE CUTS

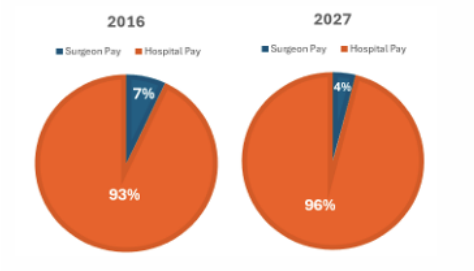
PROTECT ACCESS TO HIP & KNEE REPLACEMENT

Doctors may be forced to limit Medicare patients or stop accepting Medicare.

AAHKS
AMERICAN ASSOCIATION OF HIP AND KNEE SURGEONS



What Percentage of Medicare Reimbursement for Hip Arthroplasty Goes to the Surgeon?



WHEN PAYMENT FALLS BELOW THE COST OF PROVIDING CARE

For many practices, the proposed payment *would not* cover clinical staff, malpractice coverage, technology, office operations and regulatory requirements.

WHY THIS MATTERS TO PATIENTS

FEWER MEDICARE APPOINTMENTS

Doctors may have to limit how many Medicare patients they treat.

PRACTICES MAY LEAVE MEDICARE

Payment may not cover the overhead required to keep a practice operating.

LONGER WAITS & FARTHER TRAVEL

Fewer participating surgeons can mean fewer choices and delayed care.

YOUR VOICE MATTERS - CONTACT CONGRESS!

"Please oppose the proposed Medicare cuts to hip and knee replacement. Support payment that covers the real cost of providing safe, high-quality surgical care."

Scan the QR code or enter the web address in your browser and input your name and address to send a pre-generated letter to your Congressional Representative and Senators telling them to support your surgeon and surgical care.

Click the QR code

Or follow the link below

https://theorthoforum.quorum.us/campaign/172220/

MEDICARE PATIENTS DESERVE TIMELY ACCESS TO SPECIALIZED CARE

PLEASE CONTACT CONGRESS TODAY

Sources: CMS-1848-P; AAHKS 2027 PFS Phase I Summary (July 22, 2026)