

Table 57

**Persons Served, Services, Submitted and Allowed Charges, Program Payments, and Balance Billing  
for Medicare Physician and Supplier Services, by Type of Service: Calendar Year 1999**

Type of Service	Services			Submitted Charges	
	Persons Served <sup>1</sup>	Number in Thousands	Per Person Served <sup>1</sup>	Amount in Thousands	Per Person Served <sup>1</sup>
Total	29,331,640	1,200,603	40.9	\$116,249,395	\$3,963
Medical Care	28,271,880	442,833	15.7	31,665,151	1,120
Surgery	16,211,140	77,355	4.8	28,692,288	1,770
Consultation	9,731,000	23,924	2.5	3,845,922	395
Diagnostic X-Ray	18,938,040	98,075	5.2	10,236,139	541
Diagnostic Laboratory	23,309,800	357,329	15.3	14,164,554	608
Radiation Therapy	807,460	9,903	12.3	2,349,820	2,910
Anesthesia	4,961,740	9,621	1.9	4,959,993	1,000
Assistance at Surgery	759,740	1,155	1.5	927,701	1,221
Other Medical Services	330,440	4,309	13.0	735,007	2,224
Ambulatory Surgical Center	1,448,520	2,191	1.5	2,838,775	1,960
Renal Supplies in the Home	42,380	610	14.4	252,067	5,948
ESRD Capitation Payment	225,840	2,047	9.1	696,471	3,084
Psychological Therapy	2,242,960	15,604	7.0	1,294,083	577
Occupational Therapy	14,920	331	22.2	10,120	678
Pneumococcal Vaccine	11,834,900	24,754	2.1	218,962	19
Physical Therapy	369,160	10,546	28.6	294,397	797
Durable Medical Equipment <sup>2</sup>	6,011,700	81,302	13.5	7,884,068	1,311
Other <sup>3</sup>	NA	38,715	NA	5,183,876	NA

<sup>1</sup>Includes beneficiaries who received covered services but for whom no program payments were reported during the year. Numbers do not add to totals because beneficiaries may use more than 1 service during the reporting year.

<sup>2</sup>Ratio of assigned allowed charges to total allowed charges.

<sup>3</sup>The average program payment per person served does not reflect beneficiaries who received covered services but for whom no program payments were reported.

<sup>4</sup>Represents the amount of beneficiary Part B cost-sharing liability that non-participating physicians can charge beneficiaries on unassigned claims. In 1998, a non-participating physician could not charge a beneficiary more than 15 percent of the difference between the submitted charge and the allowed charge (the Medicare fee schedule amount) on the unassigned claims.

<sup>5</sup>Durable medical equipment (DME) was identified based on selected Berenson-Eggers Type of Service system codes and Healthcare Common Procedure Coding System (HCPCS) codes.

<sup>6</sup>Includes blood, ambulance, enteral/parenteral supplies, immunosuppressive drugs, hearing items and services, kidney donor, lump sum purchase of DME, vision items or services, rental of DME.

NOTES: Medicare charges and program payments represent fee-for-service utilization only. Numbers may not add to total because of rounding. BETOS is Berenson-Eggers Type of Service System for classifying HCPCS. ESRD is end stage renal disease. NA is not applicable.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.

Table 57—Continued

Persons Served, Services, Submitted and Allowed Charges, Program Payments, and Balance Billing  
for Medicare Physician and Supplier Services, by Type of Service: Calendar Year 1999

	Allowed Charges			Program Payments		Balance Billing <sup>4</sup>		
	Amount in Thousands	Per Person Served <sup>1</sup>	Assigned in Thousands	Percent of Charges Assigned <sup>2</sup>	Amount in Thousands	Per Person Served <sup>3</sup>	Amount in Thousands	Per Person with Liability
	\$60,563,267	\$2,065	\$59,480,788	98.2	\$46,487,527	\$1,638	\$76,730	\$23
	21,867,026	773	21,373,391	97.7	16,114,706	612	35,077	15
	11,289,807	696	11,147,393	98.7	8,824,774	559	11,573	25
	2,673,248	275	2,641,571	98.8	2,057,974	215	2,582	14
	4,353,938	230	4,307,471	98.9	3,354,283	185	3,848	10
	5,608,019	241	5,566,637	99.3	4,806,091	208	3,399	7
	873,175	1,081	868,605	99.5	694,297	864	405	57
	1,394,307	281	1,386,308	99.4	1,104,136	223	655	19
	194,596	256	192,980	99.2	154,474	204	138	20
	421,605	1,276	417,448	99.0	335,773	1,019	217	68
	1,235,949	853	1,235,909	99.9	980,964	678	4	36
	167,233	3,946	167,150	99.9	132,736	3,147	7	30
	404,213	1,790	403,980	99.9	318,304	1,414	20	101
	967,380	431	929,496	96.1	448,042	217	2,495	31
	7,138	478	7,132	99.9	5,628	382	---	4
	112,633	10	108,691	96.5	112,513	10	224	1
	211,757	574	207,320	97.9	166,357	454	252	35
	5,331,347	887	5,191,800	97.4	4,165,019	705	6,653	14
	3,449,895	NA	3,327,504	96.5	2,711,456	NA	9,184	NA