

Table 9.5

**Persons Served, Services, Submitted and Allowed Charges, Program Payments, and Balance Billing
for Medicare Physician and Supplier Services, by Physician Specialty: Calendar Year 2012**

Physician/Supplier Specialty ¹	Persons Served ²	Services		Per Person Served ²	Submitted Charges		Per Person Served ²
		Number in Thousands	Percent		Amount in Thousands	Percent	
Total All Specialties	32,900,220	1,873,755	100.0	57.0	\$329,086,038	100.0	\$10,003
Total Physicians	32,188,220	1,154,519	61.6	35.9	231,625,985	70.4	7,196
General Practice	1,470,520	9,492	0.5	6.5	1,089,639	0.3	741
General Surgery	3,645,600	12,728	0.7	3.5	6,578,960	2.0	1,805
Allergy and Immunology	459,560	12,814	0.7	27.9	445,166	0.1	969
Otology, Laryngology, Rhinology	3,121,420	15,089	0.8	4.8	2,703,359	0.8	866
Anesthesiology	6,010,820	15,801	0.8	2.6	11,221,860	3.4	1,867
Cardiology	12,375,020	86,687	4.6	7.0	18,245,960	5.5	1,474
Dermatology	6,297,620	43,491	2.3	6.9	5,631,595	1.7	894
Family Practice	14,869,620	132,717	7.1	8.9	11,793,391	3.6	793
Gastroenterology	4,642,240	15,177	0.8	3.3	5,962,429	1.8	1,284
Internal Medicine	17,587,340	189,174	10.1	10.8	23,300,138	7.1	1,325
Manipulative Therapy	103,840	723	(6)	7.0	118,459	(6)	1,141
Neurology	3,627,040	17,829	1.0	4.9	3,952,145	1.2	1,090
Neurological Surgery	849,060	2,716	0.1	3.2	3,237,957	1.0	3,814
Obstetrics and Gynecology	2,417,860	7,793	0.4	3.2	1,524,627	0.5	631
Ophthalmology	10,900,900	52,102	2.8	4.8	15,860,727	4.8	1,455
Oral Surgery (Dentists Only)	86,500	197	(6)	2.3	70,094	(6)	810
Orthopedic Surgery	5,645,240	37,473	2.0	6.6	13,014,831	4.0	2,305
Pathology	6,528,020	28,208	1.5	4.3	4,153,413	1.3	636
Plastic and Reconstructive Surgery	516,280	2,005	0.1	3.9	1,173,429	0.4	2,273
Physical Medicine and Rehabilitation	1,722,980	16,516	0.9	9.6	2,672,042	0.8	1,551
Psychiatry	2,271,280	15,873	0.8	7.0	2,152,554	0.7	948
Colorectal Surgery (Proctology)	298,700	807	(6)	2.7	441,161	0.1	1,477
Pulmonary Disease	3,222,700	20,927	1.1	6.5	3,696,276	1.1	1,147
Diagnostic Radiology	20,530,380	105,473	5.6	5.1	18,419,198	5.6	897
Thoracic Surgery	370,380	1,143	0.1	3.1	1,268,642	0.4	3,425
Urology	4,436,440	29,625	1.6	6.7	6,360,387	1.9	1,434
Chiropractic	2,091,920	21,760	1.2	10.4	1,017,489	0.3	486
Nuclear Medicine	453,400	871	(6)	1.9	307,415	0.1	678
Pediatric Medicine	257,600	1,303	0.1	5.1	189,768	0.1	737
Geriatric Medicine	543,760	3,100	0.2	5.7	424,153	0.1	780
Nephrology	2,096,300	20,060	1.1	9.6	4,989,198	1.5	2,380
Optometrist	5,853,040	13,050	0.7	2.2	1,388,117	0.4	237
Infectious Disease	1,039,900	9,004	0.5	8.7	1,387,914	0.4	1,335
Endocrinology	1,577,620	9,610	0.5	6.1	990,661	0.3	628
Podiatry	6,294,300	36,867	2.0	5.9	3,529,766	1.1	561

See footnotes at end of table.

Table 9.5--Continued

**Persons Served, Services, Submitted and Allowed Charges, Program Payments, and Balance Billing
for Medicare Physician and Supplier Services, by Physician Specialty: Calendar Year 2012**

Allowed Charges					Program Payments			Balance Billing	
Amount in Thousands	Percent	Per Person Served ²	Assigned in Thousands	Percent of Charges Assigned ³	Amount in Thousands	Percent	Per Person Served ⁴	Amount in Thousands	Per Person With Liability
\$127,751,223	100.0	\$3,883	\$127,276,051	99.6	\$99,597,040	100.0	\$3,086	\$58,132	\$53
91,583,159	71.7	2,845	91,159,535	99.5	70,545,484	70.8	2,250	53,134	56
589,132	0.5	401	578,315	98.2	441,510	0.4	313	1,310	59
2,176,758	1.7	597	2,172,765	99.8	1,703,180	1.7	477	565	63
261,087	0.2	568	258,650	99.1	198,399	0.2	444	276	45
1,128,539	0.9	362	1,123,487	99.6	854,625	0.9	284	696	40
2,015,387	1.6	335	2,011,624	99.8	1,584,468	1.6	265	541	45
6,880,908	5.4	556	6,866,762	99.8	5,298,156	5.3	439	1,994	47
3,181,300	2.5	505	3,152,545	99.1	2,409,683	2.4	397	3,688	40
6,469,001	5.1	435	6,438,962	99.5	4,798,365	4.8	335	3,713	36
1,949,486	1.5	420	1,941,247	99.6	1,523,685	1.5	334	1,152	50
12,146,326	9.5	691	12,076,793	99.4	9,331,393	9.4	543	9,333	44
59,831	(6)	576	58,582	97.9	46,159	(6)	456	136	114
1,844,553	1.4	509	1,838,586	99.7	1,409,584	1.4	399	869	44
718,340	0.6	846	716,231	99.7	563,543	0.6	681	277	73
633,737	0.5	262	628,468	99.2	497,930	0.5	211	599	24
7,780,927	6.1	714	7,748,689	99.6	5,934,715	6.0	570	4,351	44
32,631	(6)	377	31,248	95.8	25,337	(6)	304	141	64
3,965,342	3.1	702	3,954,611	99.7	3,059,815	3.1	558	1,508	73
1,302,972	1.0	200	1,298,987	99.7	1,031,711	1.0	161	583	31
372,721	0.3	722	370,912	99.5	291,602	0.3	578	234	70
1,161,800	0.9	674	1,159,566	99.8	906,469	0.9	533	320	42
1,166,666	0.9	514	1,149,434	98.5	790,310	0.8	360	2,271	66
159,320	0.1	533	158,016	99.2	124,626	0.1	425	191	103
1,817,054	1.4	564	1,812,295	99.7	1,418,329	1.4	447	664	49
5,048,829	4.0	246	5,025,281	99.5	3,991,064	4.0	201	3,220	56
343,491	0.3	927	342,890	99.8	271,137	0.3	744	89	135
2,349,864	1.8	530	2,344,022	99.8	1,806,867	1.8	413	836	53
715,194	0.6	342	646,640	90.4	525,399	0.5	266	6,286	28
88,097	0.1	194	88,007	99.9	69,439	0.1	157	13	18
78,175	0.1	303	78,083	99.9	59,891	0.1	240	9	14
236,004	0.2	434	234,669	99.4	180,293	0.2	339	190	59
2,238,563	1.8	1,068	2,236,880	99.9	1,754,097	1.8	849	245	37
1,060,563	0.8	181	1,055,276	99.5	748,624	0.8	138	205	14
704,566	0.6	678	704,042	99.9	555,234	0.6	539	77	44
525,977	0.4	333	519,149	98.7	406,147	0.4	263	898	34
2,174,727	1.7	346	2,169,000	99.7	1,642,577	1.6	268	532	27

Table 9.5--Continued

**Persons Served, Services, Submitted and Allowed Charges, Program Payments, and Balance Billing
for Medicare Physician and Supplier Services, by Physician Specialty: Calendar Year 2012**

Physician/Supplier Specialty ¹	Persons Served ²	Services			Submitted Charges		
		Number in Thousands	Percent	Per Person Served ²	Amount in Thousands	Percent	Per Person Served ²
Rheumatology	1,415,000	14,010	0.7	9.9	\$2,953,133	0.9	\$2,087
Vascular Surgery	1,453,360	4,979	0.3	3.4	3,137,094	1.0	2,159
Cardiac Surgery	340,340	1,156	0.1	3.4	1,338,083	0.4	3,932
Hematology/Oncology	2,102,760	60,661	3.2	28.8	14,221,232	4.3	6,763
Medical Oncology	741,560	17,271	0.9	23.3	4,240,451	1.3	5,718
Radiation Oncology	781,600	12,853	0.7	16.4	7,115,246	2.2	9,103
Emergency Medicine	9,828,280	29,224	1.6	3.0	11,888,047	3.6	1,210
All Other Physician ⁵	4,068,540	26,160	1.4	6.4	7,419,780	2.3	1,824
Group Practice	464,760	3,588	0.2	7.7	67,554	(6)	145
Total Non-Physician	18,561,400	186,125	9.9	10.0	38,728,466	11.8	2,087
Total Suppliers	23,213,780	529,523	28.3	22.8	58,664,033	17.8	2,527

¹Refer to Part B physician or provider specialty code as listed in the data dictionary for the National Claims History, prepared by the Office of Information Services.

²Includes 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 one service during the reporting year.

³Ratio of assigned allowed charges to total allowed charges. Includes charges for supplier services.

⁴The average program payment per person served does not reflect beneficiaries who received covered services, but for whom no program payments were reported.

⁵Includes critical care (intensivist), addiction medicine, hand surgery, peripheral vascular disease, preventive medicine, maxillofacial surgery, neuropsychiatry, surgical oncology, interventional radiology, hematology, gynecologist/oncologist, pain management, interventional pain management, intensive cardiac rehabilitation, geriatric psychiatry, and unknown physician's specialty.

⁶Less than 0.05 percent.

NOTES: Medicare charges and program payments represent fee-for-service utilization only. Due to the clarification in the billing policy of Group Practices where the actual specialty code of the performing physician within the practice is now coded, the utilization and expenditures for group practice has dropped dramatically. The methodology for calculating the balance billing amount was modified for 2012. Numbers may not add to total because of rounding. NA is not applicable.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Standard Analytical Files; data development by the Office of Information Products & Data Analytics.

Table 9.5--Continued

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Allowed Charges					Program Payments			Balance Billing	
Amount in Thousands	Percent	Per Person Served ²	Assigned in Thousands	Percent of Charges Assigned ³	Amount in Thousands	Percent	Per Person Served ⁴	Amount in Thousands	Per Person With Liability
\$1,611,378	1.3	\$1,139	\$1,604,961	99.6	\$1,247,961	1.3	\$900	\$861	\$47
928,683	0.7	639	927,520	99.9	728,573	0.7	511	169	65
370,653	0.3	1,089	368,818	99.5	292,249	0.3	872	271	301
6,113,851	4.8	2,908	6,111,029	100.0	4,846,176	4.9	2,340	406	65
1,757,092	1.4	2,369	1,756,213	99.9	1,390,391	1.4	1,904	129	41
2,059,995	1.6	2,636	2,049,051	99.5	1,628,130	1.6	2,157	1,609	725
3,013,488	2.4	307	3,009,883	99.9	2,324,163	2.3	241	525	27
2,350,148	1.8	578	2,341,348	99.6	1,833,479	1.8	462	1,152	36
38,262	(6)	82	36,845	96.3	31,772	(6)	69	173	49
11,434,448	9.0	616	11,423,076	99.9	8,792,040	8.8	483	1,189	27
24,695,354	19.3	1,064	24,656,595	99.8	20,227,745	20.3	876	3,636	26