

Table 9.9
Services, Submitted and Allowed Charges, and Program Payments for Medicare Physician and Supplier Services, by Leading HCPCS Codes: Calendar Year 2007

Description	Code	Persons Served ¹	Services		Allowed Charges		Program Payments	
			Number in Thousands	Per-cent	Amount In Thousands	Per Person Served ¹	Amount In Thousands	Per Person Served ¹
Total All HCPCS	---	32,224,600	1,766,037	100.0	\$110,633,862	\$3,433	\$85,628,319	\$2,657
Total Leading 50 HCPCS ²	---	---	587,678	33.3	52,547,641	---	39,663,305	---
Office/outpatient visit for evaluation and management, established patient, level 3	99213	24,027,580	104,642	5.9	6,063,891	252	4,200,163	175
Office/outpatient visit for evaluation and management, established patient, level 4	99214	19,973,340	65,691	3.7	5,792,352	290	4,066,533	204
Subsequent hospital care, per day, evaluation and management, level 2	99232	5,255,920	51,153	2.9	3,271,325	622	2,597,550	494
Oxygen concentrator, for delivery of 85 percent or greater oxygen	E1390	1,454,860	12,157	0.7	2,415,237	1,660	1,877,982	1,291
Extracapsular cataract removal with insertion of IOL	66984	1,214,400	3,176	0.2	2,155,838	1,775	1,706,304	1,405
Subsequent hospital care, per day, evaluation and management, level 3	99233	3,257,560	19,663	1.1	1,806,564	555	1,435,711	441
Ambulance service, ALS, emergency transport, level 1	A0427	2,835,700	4,310	0.2	1,604,942	566	1,267,937	447
Emergency department visit for evaluation and management of patient, level 5	99285	4,990,400	7,660	0.4	1,264,796	253	989,634	198
Ambulance service, BLS, non-emergency transport	A0428	1,554,220	6,144	0.3	1,212,667	780	963,748	620
Level IV-Surgical pathology, gross and microscopic examination	88305	6,576,940	17,575	1.0	1,141,018	173	888,462	135
Office consultation new or established patient, level 4	99244	5,023,980	6,131	0.3	1,084,602	216	817,620	163
Blood glucose test or reagent strips for home blood glucose monitor, per 50 strips	A4253	3,572,960	28,787	1.6	1,056,914	296	790,381	221
Myocardial perfusion imaging; tomographic, multiple studies, at rest of stress	78465	2,842,620	3,193	0.2	1,006,234	354	791,101	278
Initial hospital care for evaluation and management, level 3	99223	3,811,040	5,717	0.3	989,270	260	775,741	204
See footnotes at end of table.								

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Office/outpatient visit for evaluation and management, established patient, level 5	99215	5,205,320	8,022	0.5	\$967,870	\$186	\$682,287	\$131
Injection, darbepoetin alfa, 1mcg (non-ESRD use)	J0881	222,480	1,409	0.1	938,619	4,219	742,935	3,339
Initial inpatient consultation, new or established patient, level 4	99254	3,076,200	5,842	0.3	923,631	300	726,342	236
Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength endurance, range of motion and flexibility	97110	1,596,160	33,751	1.9	907,587	569	713,890	447
Ophthalmological examination and evaluation, comprehensive, established patient	92014	8,368,260	9,995	0.6	897,939	107	603,466	72
Transportation services, ground mileage, per statute mile	A0425	4,448,240	44,235	2.5	866,488	195	691,657	155
Echocardiography, transthoracic	93307	5,883,880	7,464	0.4	845,815	144	655,540	111
Rituximab, 100 mg.	J9310	46,160	1,622	0.1	812,591	17,604	645,434	13,983
Critical care, evaluation and management of critically ill or injured patient; first 30-74 minutes	99291	1,266,340	3,806	0.2	806,647	637	640,418	506
Ambulance service, BLS, emergency transport	A0429	1,648,880	2,421	0.1	776,062	471	612,399	371
Office/outpatient visit for evaluation and management, established patient, level 2	99212	10,273,600	21,702	1.2	765,643	75	540,933	53
Radiation treatment delivery, intensity modulated, single or multiple fields	77418	37,640	1,081	0.1	676,429	17,971	539,866	14,343
Office consultation, new or established patient, level 3	99243	4,332,240	5,045	0.3	602,392	139	442,682	102
Injection, bevacizumab, 10 mg	J9035	102,460	434	(3)	601,923	5,875	477,846	4,664
Injection, infliximab, 10 mg	J1745	47,220	268	(3)	587,771	12,447	458,529	9,710
Emergency department visit for evaluation and management of patient, level 4	99284	3,862,420	5,359	0.3	584,466	151	447,556	116
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Subsequent hospital care, per day, evaluation and management, level 1	99231	3,033,460	16,276	0.9	\$576,389	\$190	\$456,493	\$150
Initial inpatient consultation, new or established patient, level 5	99255	1,833,040	2,901	0.2	576,214	314	454,435	248
Injection, pegfilgrastim, 6mg	J2505	70,640	253	(3)	546,818	7,741	434,803	6,155
Injection, epoetin alfa, (for non-ESRD use), 1000 units	J0885	175,460	2,895	0.2	531,025	3,026	419,453	2,391
ESRD related services during the course of treatment, for patients age 20 years and over with 4 or more physician visits per month	G0317	262,760	1,869	0.1	529,833	2,016	418,301	1,592
Power wheelchair, group 2 standard, captains chair, weight capacity up to 300 pounds	K0823	125,800	129	(3)	503,622	4,003	401,191	3,189
Office consultation new or established patient, level 5	99245	1,992,460	2,281	0.1	502,956	252	385,180	193
Office/outpatient visit for evaluation and management, new patient, level 3	99203	4,570,260	5,218	0.3	467,484	102	317,170	69
Subsequent nursing facility care, per day, patient evaluation and management, development of minor complication	99308	1,639,940	8,623	0.5	446,843	272	330,386	201
Chiropractic manipulative treatment, spinal, three to four regions	98941	1,395,140	13,653	0.8	444,357	319	327,411	235
Drug administered other than oral method; unclassified drugs	J3490	198,440	816	(3)	444,354	2,239	354,475	1,786
Office/outpatient evaluation and management, new patient, level 4	99204	2,905,480	3,234	0.2	443,396	153	307,165	106
Individual psychotherapy, office or outpatient, 45-50 minutes	90806	512,720	5,512	0.3	439,434	857	211,056	412

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			Number in Thousands	Per- cent	Amount In Thousands	Per Person Served ¹	Amount In Thousands	Per Person Served ¹
Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient	92012	3,769,720	6,524	0.4	\$402,774	\$107	\$280,302	\$74
Arthroplasty, knee, condyle and plateau; medial and lateral compartments with or without patella resurfacing	27447	241,460	388	(3)	395,597	1,638	312,885	1,296
Subsequent nursing facility care, per day, patient evaluation and management, development of significant complication or new problem	99309	1,218,700	5,327	0.3	385,424	316	288,431	237
Doppler echocardiography, pulsed wave and/or continuous wave with special display	93320	5,984,720	7,701	0.4	379,434	63	300,165	50
Doppler echocardiography color flow velocity mapping	93325	5,951,900	7,695	0.4	368,337	62	292,286	49
Chemotherapy administration, intravenous infusion technique; up to 1 hour	96413	298,240	2,272	0.1	368,192	1,235	289,790	972
Hospital discharge day management, 30 min. or less	99238	3,820,180	5,656	0.3	367,634	96	291,275	76

¹Includes beneficiaries who received covered services, but for whom no program payments were reported during the year. Number of persons do not add to total because beneficiaries may use more than one service during the reporting year.

²The leading 50 HCPCS codes were selected based on the amount of allowed charges.

³Less than 0.05 percent.

NOTES: HCPCS is Healthcare Common Procedure Coding System. The Current Procedural Terminology (CPT) codes, descriptions, and other data only are Copyright 2006 American Medical Association All Rights Reserved (or such other data of publication of CPT). CPT is a trademark of the American Medical Association (AMA). For fuller description of each procedure, refer to the previously mentioned publication. IOL is intraocular lens. ESRD is end stage renal disease. ALS is advanced life support. BLS is basic life support. PET is position emission tomography. CT is computed tomography.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Data Extract System; data development by the Office of Research, Development, and Information.