

Utilization (Procedure Volume) Data Published on the Medicare.gov Compare Tool

Doctors and Clinicians Public Reporting Fact Sheet

December 2025

Overview

In January 2024, the Centers for Medicare & Medicaid Services (CMS) began publishing utilization data, specifically procedure volume, for the first time on clinician profile pages on the Medicare.gov [compare tool](#). The new data expands the information available to Medicare patients and caregivers when choosing clinicians ([87 FR 70109–70111](#) and [88 FR 79395–79400](#)).

[Section 104\(a\)](#) of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) mandates that information on items and services provided to Medicare patients by clinicians and other eligible professionals must be made publicly available on an annual basis and in an easily understandable format. Section 104(e) of MACRA also requires that we integrate this data into the Medicare.gov compare tool each year.

Utilization data was first published only in downloadable format in late 2017. This information is a subset of the Medicare Physician & Other Practitioners by Provider and Service dataset and is published in the [Provider Data Catalog \(PDC\)](#). While the source of this data is useful to health care researchers and other interested parties who have the expertise to accurately interpret it, the technical nature of the information isn't easily accessible or usable by patients.

A procedure volume data file is available in the PDC and includes the procedure volume and category information currently publicly reported on clinician profile pages on the Medicare.gov compare tool. The procedure volume data on profile pages reflect procedures recently performed by clinicians for Original Medicare and Medicare Advantage (MA) patients. Additional procedures will be added periodically, as feasible.

Procedure Volume Data on Clinician Profile Pages

Why report procedure volume data on clinician profile pages?

- Reporting procedure volume data on patient-facing clinician profile pages provides 2 main benefits. First, Medicare patients and their caregivers are able to identify clinicians who have performed specific types of procedures for Original Medicare and MA patients.
- The second benefit is providing categories of procedure volume data in a plain language display that's more usable to patients and their caregivers.

What procedure volume data is included on clinician profile pages?

We'll prioritize publishing a subset of procedures based on established criteria. Priority procedures must meet one or more of the following:

- Have evidence of a positive relationship between volume and quality in published peer-reviewed clinical research;
- Be affiliated with existing Merit-based Incentive Payment System (MIPS) measures indicating importance to CMS;
- Represent care that a patient might shop for a clinician to provide; and/or
- Be a U.S. Department of Health and Human Services (HHS) priority ([87 FR 70109–70111](#)) to publicly report procedure volume data in a meaningful way to Medicare patients and caregivers.

Healthcare Common Procedure Coding System (HCPCS) codes billed to Part B noninstitutional claims or MA encounter data have been collapsed into procedure categories using the Restructured Berenson-Eggers Type of Service (R-BETOS) Codes Classification System 2.0.

[Restructured BETOS](#) is a taxonomy, updated on an annual basis, that allows for the grouping of procedure codes into clinically meaningful categories and subcategories. For procedures in which no Restructured BETOS categories are available, procedure code categories used in MIPS (such as those defined for MIPS cost or quality measures) may be used instead. In addition to Restructured BETOS and code sources used in MIPS, we may use alternate sources to create clinically meaningful and appropriate procedural categories, particularly when no relevant grouping exists, as finalized in the Calendar Year (CY) 2024 Physician Fee Schedule (PFS) Final Rule. We'll engage subject matter experts and interested parties through periodic requests for feedback using methods outside of rulemaking including, but not limited to, Listserv emails, listening sessions, and focus groups to solicit feedback on additional procedure

Utilization (Procedure Volume) Data on the Medicare.gov Compare Tool Fact Sheet

categories planned for future releases of utilization data, as appropriate and technically feasible.

The release of [procedure volume data](#) on clinician profile pages includes 19 procedures (additional procedures will be added periodically, as feasible):

1. Hip replacement
2. Knee replacement
3. Laminectomy/spinal fusion
4. Spinal fusion
5. Lower limb arthroscopy
6. Upper limb arthroscopy
7. Cataract surgery
8. Colonoscopy
9. Hernia repair—groin
10. Hernia repair—minimally invasive
11. Upper GI endoscopy
12. Mastectomy
13. Coronary angioplasty and stenting
14. CABG
15. Pacemaker insertion or repair
16. Prostate resection
17. Leg revascularization
18. Varicose vein removal
19. Melanoma (skin cancer) excision

The procedure volume data file is available as part of the [doctors and clinicians datasets](#) in the PDC. Learn more [about the data](#) on the [Care Compare: Doctors and Clinicians Initiative webpage](#).

The procedure volume data shown on the profile pages reflect only Original Medicare and MA claims data. This means that the listed procedures represent care delivered to [Original Medicare](#) and [MA](#) patients and doesn't include procedures performed for patients who have other health care cost coverage.

Utilization (Procedure Volume) Data on the Medicare.gov Compare Tool Fact Sheet

The procedures on profile pages were performed by clinicians for Original Medicare and MA patients for the most recent time period of 12 months, before allowing a 3-month claim-processing period (for example, claims for dates of service occurring between June 1, 2023, and June 30, 2024, that were processed by September 30, 2024). We'll refresh the data on a quarterly basis, as technically feasible. For example, procedure volume data will only appear on clinician profile pages, not group profile pages, as clinicians are the ones to whom experience is attributable.

How's the procedure volume data displayed on clinician profile pages?

Procedure volume data is included in the “Services” section on the profile pages of clinicians. Within this section, the information shown in the “Procedures” category provides a recent count of the number of times the clinician performed the listed medical procedure(s) over 12 months for Original Medicare and MA patients. Alongside each listed procedure is a plain language description of the procedure and an indication of where the clinician falls in the volume distribution (e.g., 78th percentile for performing a given procedure), as applicable. The distribution position compares a clinician to their peers who perform the same procedure, based on the number of procedures performed in the same 12-month period for Original Medicare and MA patients.

Higher percentiles mean the clinician performed more procedures compared to other clinicians who also performed the same procedure. If the clinician's annual number of procedures is between 1 and 10, the percentile won't be reported.¹

¹ In accordance with the [small cell size suppression policy](#), counts less than 11 can't be publicly reported to protect patient privacy.

Utilization (Procedure Volume) Data on the Medicare.gov Compare Tool Fact Sheet

Figure 1. Example of Procedure Volume Data Reported on a Clinician Profile Page

Kira Clarke

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Procedures

Procedure information shows how often this clinician performed the medical procedure(s) in the last 12 months for patients with Medicare. These are based on the number of times a clinician billed the medical procedure(s) to Original Medicare and Medicare Advantage.

Note: This information may not reflect all procedure types, or the total number of procedures performed by this clinician. These aren't the only indicators of quality of care.

Percentiles compare a clinician to their peers who perform the same procedure based on the number of procedures performed in the last 12 months for patients with Medicare. Higher percentiles mean this clinician performed more procedures compared to other clinicians who also performed this procedure.

MEDICARE PROCEDURES PERFORMED IN THE LAST 12 MONTHS

This page includes procedures that this clinician performed for patients with Original Medicare and Medicare Advantage in the last 12 months. This clinician may also perform more types of procedures within Medicare and may perform procedures for patients with other types of health insurance, like commercial insurance plans not shown here.

Hernia repair (minimally invasive)	▼	Annual number of procedures: 26 This clinician's percentile: 95 th
Hernia repair - groin (open)	▼	Annual number of procedures: 1-10

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Jane Doe, MD

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Medicare procedures performed in the last 12 months

This page includes procedures that this clinician performed for patients with Original Medicare and Medicare Advantage in the last 12 months. This clinician may also perform more types of procedures within Medicare and may perform procedures for patients with other types of health insurance, like commercial insurance plans not shown here.

Colonoscopy

Annual number of procedures: 101
This clinician's percentile: 86th

Upper gastrointestinal (GI) endoscopy for acid reflux

Annual number of procedures: 364
This clinician's percentile: 97th

Get in Touch

If you have any questions about public reporting for clinicians on the Medicare.gov compare tool, contact the Quality Payment Program (QPP) Service Center by emailing QPP@cms.hhs.gov, submitting a [QPP Service Center ticket](#), or calling 1-866-288-8292 (Monday–Friday, 8 a.m.–8 p.m. ET).

People who are deaf or hard of hearing can call 711 to connect with a Telecommunications Relay Services (TRS) Communications Assistant.

To receive updates on public reporting for clinicians, subscribe to the QPP and Care Compare: Doctors and Clinicians [Listservs](#).

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Version History

Date	Change Description
Dec 11, 2025	Original version.