

Table 58

**Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2001**

Place of Service	Persons Served ¹	Services		Submitted Charges	
		Number in Thousands	Per Person Served ¹	Amount in Thousands	Per Person Served ¹
Total	30,688,840	1,340,531	43.7	\$147,219,411	\$4,797
Office	28,485,440	656,525	23.0	52,282,685	1,835
Home	7,515,940	106,299	14.1	11,667,881	1,552
Inpatient Hospital	8,050,780	191,916	23.8	37,339,151	4,638
Outpatient Hospital ⁴	16,287,300	82,842	5.1	18,821,970	1,156
Emergency Room Hospital ⁴	9,377,060	32,315	3.4	4,695,717	501
Ambulatory Surgical Center	2,207,380	7,492	3.4	7,513,524	3,404
Skilled Nursing Care Facility	2,223,220	27,823	12.5	2,027,835	912
Nursing Home	1,668,940	18,078	10.8	887,241	532
Hospice	8,080	21	2.6	1,964	243
Ambulance ⁵	3,706,360	25,736	6.9	3,915,321	1,056
Independent Laboratory	14,764,660	164,674	11.2	6,112,948	414
All Other ⁶	NA	26,810	NA	1,953,174	NA

See footnotes at end of table.

Table 58—Continued
Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2001

Place of Service	Allowed Charges				Program Payments			
	Amount in Thousands	Percent	Per Person Served ¹	Assigned in Thousands	Percent of Charges Assigned ²	Amount in Thousands	Percent	Per Person Served ³
Total	\$76,672,497	100.0	\$2,498	\$75,636,818	98.6	\$59,113,949	100.0	\$1,976
Office	33,844,895	44.1	1,188	33,201,638	98.1	25,245,505	42.7	919
Home	7,965,165	10.4	1,060	7,786,653	97.8	6,227,444	10.5	841
Inpatient Hospital	15,871,982	20.7	1,971	15,790,826	99.5	12,565,359	21.3	1,570
Outpatient Hospital ⁴	6,289,973	8.2	386	6,257,821	99.5	4,892,462	8.3	309
Emergency Room Hospital ⁴	2,007,676	2.6	214	2,005,138	99.9	1,550,538	2.6	169
Ambulatory Surgical Center	2,798,087	3.6	1,268	2,788,543	99.7	2,214,552	3.7	1,005
Skilled Nursing Care Facility	1,464,666	1.9	659	1,461,314	99.8	1,094,311	1.9	502
Nursing Home	634,888	0.8	380	633,647	99.8	457,392	0.8	281
Hospice	1,132	(7)	140	1,132	100.0	884	(7)	112
Ambulance ⁵	2,527,139	3.3	682	2,450,804	97.0	2,005,395	3.4	541
Independent Laboratory	2,063,918	2.7	140	2,063,298	99.9	1,953,853	3.3	133
All Other ⁶	1,202,976	1.6	NA	1,196,004	99.4	906,264	1.5	NA

¹Includes 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.

²Ratio of assigned allowed charges to total allowed charges. Includes charges for supplier services.

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

⁴Prior to 1992, emergency room and outpatient hospital data were aggregated.

⁵Excludes air or water services.

⁶Includes custodial care facilities, comprehensive inpatient rehabilitation facilities, State or local public health clinics, end stage renal disease treatment facilities, community mental health centers, inpatient psychiatric facilities, etc.

⁷Less than 0.05 percent.

NOTES: Medicare charges and program payments represent fee-for-service utilization only. 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.