

Table 58

**Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2003**

Place of Service	Persons Served ¹	Services		Submitted Charges	
		Number in Thousands	Per Person Served ¹	Amount in Thousands	Per Person Served ¹
Total	32,547,900	1,573,445	48.3	\$191,593,731	\$5,887
Office	30,303,260	769,808	25.4	71,844,989	2,371
Home	8,832,100	131,059	14.8	16,394,554	1,856
Inpatient Hospital	8,417,360	210,196	25.0	43,801,884	5,204
Outpatient Hospital ⁴	17,461,180	94,645	5.4	22,751,944	1,303
Emergency Room Hospital ⁴	10,104,180	37,162	3.7	6,320,314	626
Ambulatory Surgical Center	2,805,480	10,171	3.6	10,872,067	3,875
Skilled Nursing Care Facility	2,184,920	25,180	11.5	1,915,889	877
Nursing Home	1,855,680	25,148	13.6	1,379,340	743
Hospice	5,460	13	2.4	1,326	243
Ambulance ⁵	4,184,160	49,701	11.9	5,339,430	1,276
Independent Laboratory	16,130,260	189,878	11.8	8,329,406	516
All Other ⁶	NA	30,484	NA	2,642,588	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 2003

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	\$92,638,665	100.0	\$2,846	\$91,733,060	99.0	\$71,733,844	100.0	\$2,254
Office	43,088,036	46.5	1,422	42,467,464	98.6	32,487,867	45.3	1,107
Home	10,987,058	11.9	1,244	10,817,853	98.5	8,605,230	12.0	987
Inpatient Hospital	16,374,549	17.7	1,945	16,305,299	99.6	12,964,325	18.1	1,548
Outpatient Hospital ⁴	6,704,635	7.2	384	6,674,627	99.6	5,212,521	7.3	306
Emergency Room Hospital ⁴	2,243,435	2.4	222	2,241,123	99.9	1,738,748	2.4	175
Ambulatory Surgical Center	3,611,210	3.9	1,287	3,601,720	99.7	2,853,751	4.0	1,019
Skilled Nursing Care Facility	1,294,952	1.4	593	1,292,999	99.8	971,362	1.4	453
Nursing Home	983,332	1.1	530	982,211	99.9	717,252	1.0	393
Hospice	804	(7)	147	804	100.0	626	(7)	117
Ambulance ⁵	3,244,741	3.5	775	3,244,351	99.9	2,573,146	3.6	615
Independent Laboratory	2,621,530	2.8	163	2,621,216	99.9	2,477,114	3.5	154
All Other ⁶	1,484,383	1.6	NA	1,483,393	99.9	1,131,902	1.6	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 one 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 Data Extract System; data development by the Office of Research, Development, and Information.