

Table 10.2
Covered Charges for Hospital Outpatient Services Under Medicare, by Demographic Characteristics,
Type of Entitlement, and Type of Service: Calendar Year 2008

| Demographic Characteristic and Type of Entitlement | Type of Service | | | | |
|---|--|-------------|-------------------|--------------|--------------|
| | Total | Clinic | Emergency Room | Laboratory | Radiology |
| | Covered Charges in Thousands | | | | |
| Total | \$221,868,879 | \$2,417,017 | \$9,348,080 | \$21,501,929 | \$38,933,868 |
| Sex | | | | | |
| Male | 104,292,547 | 1,045,543 | 3,831,156 | 9,214,299 | 17,080,944 |
| Female | 117,576,332 | 1,371,474 | 5,516,923 | 12,287,630 | 21,852,924 |
| Race³ | | | | | |
| White | 162,480,109 | 1,758,437 | 7,165,787 | 17,637,013 | 32,574,159 |
| Other | 58,585,934 | 650,658 | 2,155,607 | 3,794,551 | 6,245,219 |
| Type of Entitlement | | | | | |
| Aged ⁴ | 156,248,053 | 1,792,525 | 6,264,697 | 16,722,910 | 32,237,476 |
| Disabled ⁵ | 65,620,826 | 624,492 | 3,083,383 | 4,779,019 | 6,696,391 |
| | Percent Distribution | | | | |
| Total | 100.0 | 1.1 | 4.2 | 9.7 | 17.5 |
| Sex | | | | | |
| Male | 100.0 | 1.0 | 3.7 | 8.8 | 16.4 |
| Female | 100.0 | 1.2 | 4.7 | 10.5 | 18.6 |
| Race³ | | | | | |
| White | 100.0 | 1.1 | 4.4 | 10.9 | 20.0 |
| Other | 100.0 | 1.1 | 3.7 | 6.5 | 10.7 |
| Type of Entitlement | | | | | |
| Aged ⁴ | 100.0 | 1.1 | 4.0 | 10.7 | 20.6 |
| Disabled ⁵ | 100.0 | 1.0 | 4.7 | 7.3 | 10.2 |
| | Average Charge per Enrollee ⁶ | | | | |
| Total | \$6,949 | \$76 | \$293 | \$673 | \$1,219 |
| Sex | | | | | |
| Male | 7,449 | 75 | 274 | 658 | 1,220 |
| Female | 6,558 | 76 | 308 | 685 | 1,219 |
| Race³ | | | | | |
| White | 6,039 | 65 | 266 | 656 | 1,211 |
| Other | 11,748 | 130 | 432 | 761 | 1,252 |
| Type of Entitlement | | | | | |
| Aged ⁴ | 5,912 | 68 | 237 | 633 | 1,220 |
| Disabled ⁵ | 11,935 | 114 | 561 | 869 | 1,218 |

¹Includes charges for physical therapy, occupational therapy, and speech/language pathology.

²Includes charges for blood, blood administration, cardiology, ambulatory surgical care, magnetic resonance imaging, drugs requiring specific identification, etc.

³Excludes unknown race.

⁴Includes aged persons with end stage renal disease (ESRD).

⁵Includes disabled persons with ESRD and persons entitled to Medicare because of ESRD only.

⁶Medicare enrollees in managed care plans are not included in the denominator used to calculate the average charge per enrollee.

NOTES: Numbers may not add to totals because of rounding. Hospital outpatient services also include the facility component for those procedures performed in a hospital outpatient department operating room which are subject to the ambulatory surgical center (ASC) or blended ASC fee schedule and hospital-based renal dialysis facility services.

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.

Table 10.2--Continued
Covered Charges for Hospital Outpatient Services Under Medicare, by Demographic Characteristics,
Type of Entitlement, and Type of Service: Calendar Year 2008

| Type of Service | | | | | |
|--|-----------------------------|----------------------------------|-------------------|-------------------------------|--------------------|
| Pharmacy | Rehabilitation ¹ | Medical/ Surgical Supplies | Operating Room | End Stage Renal Disease | Other ² |
| Covered Charges in Thousands | | | | | |
| \$4,573,851 | \$3,484,204 | \$13,957,634 | \$19,865,653 | \$34,322,220 | \$73,464,419 |
| 2,012,813 | 1,358,149 | 7,024,941 | 9,041,463 | 18,414,832 | 35,268,404 |
| 2,561,038 | 2,126,054 | 6,932,692 | 10,824,190 | 15,907,387 | 38,196,014 |
| 3,772,303 | 2,949,879 | 11,703,354 | 16,550,141 | 16,459,240 | 51,909,791 |
| 786,577 | 524,775 | 2,212,162 | 3,255,408 | 17,685,287 | 21,275,685 |
| 3,442,068 | 2,875,554 | 11,231,881 | 15,805,649 | 16,261,298 | 49,613,990 |
| 1,131,782 | 608,649 | 2,725,753 | 4,060,003 | 18,060,921 | 23,850,429 |
| Percent Distribution | | | | | |
| 2.1 | 1.6 | 6.3 | 9.0 | 15.5 | 33.1 |
| 1.9 | 1.3 | 6.7 | 8.7 | 17.7 | 33.8 |
| 2.2 | 1.8 | 5.9 | 9.2 | 13.5 | 32.5 |
| 2.3 | 1.8 | 7.2 | 10.2 | 10.1 | 31.9 |
| 1.3 | 0.9 | 3.8 | 5.6 | 30.2 | 36.3 |
| 2.2 | 1.8 | 7.2 | 10.1 | 10.4 | 31.8 |
| 1.7 | 0.9 | 4.2 | 6.2 | 27.5 | 36.3 |
| Average Charge per Enrollee ⁶ | | | | | |
| \$143 | \$109 | \$437 | \$622 | \$1,075 | \$2,301 |
| 144 | 97 | 502 | 646 | 1,315 | 2,519 |
| 143 | 119 | 387 | 604 | 887 | 2,130 |
| 140 | 110 | 435 | 615 | 612 | 1,930 |
| 158 | 105 | 444 | 653 | 3,546 | 4,266 |
| 130 | 109 | 425 | 598 | 615 | 1,877 |
| 206 | 111 | 496 | 738 | 3,285 | 4,338 |