

**Leading Medicare Physician and Supplier BETOS
Procedures Based on Allowed Charges
Calendar Years 2000 and 2001**

Betos Code	Description	Medicare Allowed Charges	
		2000	2001
M1B	Office Visits - Established	\$8,548,562,453	\$9,736,079,591
M2B	Hospital Visit - Subsequent	4,502,138,903	4,902,921,054
M6	Consultations	2,944,063,178	3,314,346,197
O1E	Other Drugs	2,026,307,436	2,765,739,546
O1D	Chemotherapy	2,322,767,817	2,763,102,313
O1A	Ambulance	2,221,895,701	2,567,573,485
P4B	Eye Procedure - Cataract/Removal Lens Insertion	1,901,684,180	2,009,967,157
D1C	Oxygen and Supplies	1,773,277,946	1,964,082,934
M5C	Specialist - Ophthalmology	1,462,799,020	1,847,504,784

NOTE: BETOS is the Berenson/Eggers Type of Service classification system, a joint Urban Institute/Centers for Medicare & Medicaid Services effort.

SOURCE: CMS/OIS

Betos Allowed Charges

