

Table 9.4
Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2010

Place of Service	Persons Served ¹	Services		Submitted Charges	
		Number in Thousands	Per Person Served ¹	Amount in Thousands	Per Person Served ¹
Total	32,091,660	1,857,482	57.9	\$302,709,508	\$9,433
Office	29,729,860	894,154	30.1	117,503,687	3,952
Home	10,304,400	161,892	15.7	23,411,231	2,272
Inpatient Hospital	7,812,520	194,928	25.0	55,220,117	7,068
Outpatient Hospital ⁴	17,537,020	109,009	6.2	31,605,317	1,802
Emergency Room Hospital ⁴	10,331,240	46,002	4.5	12,726,185	1,232
Ambulatory Surgical Center	3,623,840	18,215	5.0	24,115,455	6,655
Skilled Nursing Care Facility	2,042,580	24,587	12.0	2,485,679	1,217
Nursing Home	1,993,000	33,419	16.8	2,249,206	1,129
Hospice	7,200	23	3.1	2,859	397
Ambulance ⁵	4,757,940	63,131	13.3	10,691,470	2,247
Independent Laboratory	17,776,680	277,222	15.6	17,480,449	983
All Other ⁶	8,263,860	34,900	4.2	5,217,854	631

See footnotes at end of table.

Table 9.4--Continued
Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2010

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	Per Person Served ³
Total	\$122,904,370	100.0	\$3,830	\$122,352,418	99.6	\$95,036,813	\$3,027
Office	57,362,642	46.7	1,929	56,947,801	99.3	43,080,041	1,495
Home	12,585,171	10.2	1,221	12,517,773	99.5	9,735,922	964
Inpatient Hospital	19,179,760	15.6	2,455	19,144,622	99.8	15,181,454	1,951
Outpatient Hospital ⁴	8,372,601	6.8	477	8,352,187	99.8	6,451,507	376
Emergency Room Hospital ⁴	3,483,450	2.8	337	3,480,288	99.9	2,675,479	263
Ambulatory Surgical Center	5,725,363	4.7	1,580	5,717,522	99.9	4,502,345	1,244
Skilled Nursing Care Facility	1,625,447	1.3	796	1,624,804	99.9	1,230,226	609
Nursing Home	1,457,658	1.2	731	1,457,353	99.9	1,082,105	549
Hospice	1,640	(7)	228	1,640	99.9	1,239	177
Ambulance ⁵	5,601,702	4.6	1,177	5,601,691	99.9	4,434,696	933
Independent Laboratory	4,918,461	4.0	277	4,918,279	99.9	4,641,560	261
All Other ⁶	2,590,476	2.1	313	2,588,459	99.9	2,020,239	247

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.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Standard Analytical Files; data development by the Center for Strategic Planning.