

Table 9.4
Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,
by Place of Service: Calendar Year 2006

Place of Service	Persons Served ¹	Services		Submitted Charges	
		Number in Thousands	Per Person Served ¹	Amount in Thousands	Per Person Served ¹
Total	32,981,880	1,766,733	53.6	\$248,447,505	\$7,533
Office	30,646,240	878,148	28.7	100,031,539	3,264
Home	10,887,340	152,428	14.0	20,080,599	1,844
Inpatient Hospital	8,282,900	211,718	25.6	49,525,664	5,979
Outpatient Hospital ⁴	17,761,380	102,963	5.8	26,891,595	1,514
Emergency Room Hospital ⁴	10,260,760	41,433	4.0	8,521,976	831
Ambulatory Surgical Center	3,413,800	14,260	4.2	16,412,618	4,808
Skilled Nursing Care Facility	2,117,900	23,368	11.0	2,127,694	1,005
Nursing Home	1,967,040	29,214	14.9	1,721,913	875
Hospice	4,880	17	3.5	1,674	343
Ambulance ⁵	4,506,520	56,390	12.5	7,556,010	1,677
Independent Laboratory	17,284,800	231,277	13.4	11,715,197	678
All Other ⁶	NA	25,517	NA	3,861,026	NA

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 2006

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	\$110,135,017	100.0	\$3,339	\$109,387,656	99.3	\$85,218,098	\$2,647
Office	53,010,407	48.1	1,730	52,468,510	99.0	40,004,446	1,350
Home	11,942,328	10.8	1,097	11,836,706	99.1	9,301,635	868
Inpatient Hospital	17,579,478	16.0	2,122	17,524,052	99.7	13,910,460	1,686
Outpatient Hospital ⁴	7,548,224	6.9	425	7,521,712	99.6	5,841,499	336
Emergency Room Hospital ⁴	2,692,012	2.4	262	2,689,817	99.9	2,077,207	206
Ambulatory Surgical Center	4,697,530	4.3	1,376	4,688,372	99.8	3,704,157	1,086
Skilled Nursing Care Facility	1,462,857	1.3	691	1,461,420	99.9	1,103,796	528
Nursing Home	1,145,993	1.0	583	1,145,423	99.9	837,664	431
Hospice	986	(7)	202	986	99.9	763	160
Ambulance ⁵	4,468,303	4.1	992	4,467,759	99.9	3,540,261	786
Independent Laboratory	3,458,631	3.1	200	3,458,133	99.9	3,260,511	189
All Other ⁶	2,128,268	1.9	NA	2,124,766	99.8	1,635,699	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.