

Table 63

**Services, Submitted and Allowed Charges, and Program Payments for Medicare Physician and Supplier Services, by Principal  
Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2001**

Principal ICD-9-CM <sup>1</sup> Diagnosis Within MDC	ICD-9-CM Code	Services	Submitted Charges	Allowed Charges		Program Payments
		in Thousands	in Thousands	Amount in Thousands	Percent of Charges Assigned	in Thousands
Total, All Diagnoses	---	1,340,530	\$147,219,410	\$76,672,496	98.6	\$59,113,948
Leading Diagnoses <sup>2</sup>	---	790,251	79,527,936	42,139,310	98.6	32,456,387
Infectious and Parasitic Diseases (MDC 1)	001-139	18,072	1,343,179	870,002	99.0	662,592
Dermatophytosis	110	7,656	391,353	311,808	99.0	225,298
Neoplasm (MDC 2)	140-239	114,216	18,501,666	9,394,949	99.1	7,406,112
Malignant Neoplasm of Colon	153	8,099	895,387	425,688	99.6	338,246
Malignant Neoplasm of Trachea, Bronchus, and Lung	162	14,048	1,913,877	970,538	99.7	771,168
Other Malignant Neoplasm of Skin	173	6,390	1,386,065	826,048	98.5	644,757
Malignant Neoplasm of Female Breast	174	14,328	1,767,357	875,670	98.0	690,682
Malignant Neoplasm of Prostate	185	14,027	3,040,185	1,825,453	99.5	1,441,571
Endocrine, Nutritional and Metabolic Diseases and Immunity Disorders (MDC 3)	240-279	142,497	6,842,652	3,876,877	97.4	3,057,576
Thyroiditis	244	11,294	490,924	234,640	98.3	197,926
Diabetes Mellitus	250	75,399	3,442,084	2,259,110	96.6	1,740,228
Disorders of Lipoid Metabolism	272	36,693	1,395,253	592,223	98.1	487,197
Disorders of Fluid, Electrolyte, and Acid-Base Balance	276	6,736	486,611	276,912	99.4	220,415
Diseases of the Blood and Blood-Forming Organs (MDC 4)	280-289	39,190	2,844,133	1,524,119	99.6	1,239,041
Other and Unspecified Anemias	285	19,346	1,564,533	834,619	99.6	679,176
Mental Disorders (MDC 5)	290-319	33,592	3,192,690	2,218,231	98.0	1,370,392
Schizophrenic Disorders	295	5,985	485,404	327,716	99.4	201,671
Affective Psychoses	296	10,032	982,852	700,273	97.1	409,741
Diseases of the Nervous System and Sense Organs (MDC 6)	320-389	71,332	14,851,626	7,767,149	98.8	5,874,397
Other Retinal Disorders	362	7,731	1,555,039	1,030,437	99.4	785,466
Glaucoma	365	10,033	1,051,368	715,843	98.5	514,737
Cataract	366	15,833	7,342,687	3,133,782	99.0	2,399,605

See footnotes at end of table.

Table 63—Continued

**Services, Submitted and Allowed Charges, and Program Payments for Medicare Physician and Supplier Services, by Principal  
Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2001**

Principal ICD-9-CM <sup>1</sup> Diagnosis Within MDC	ICD-9-CM Code	Services in Thousands	Submitted Charges in Thousands	Allowed Charges		Program Payments in Thousands
				Amount in Thousands	Percent of Charges Assigned	
Diseases of the Circulatory System (MDC 7)	390-459	215,936	\$26,678,720	\$13,045,891	98.8	\$10,047,654
Essential Hypertension	401	49,644	2,676,758	1,750,882	97.4	1,246,478
Acute Myocardial Infarction	410	4,570	789,593	351,031	98.8	277,068
Other Acute and Subacute Forms of Ischemic Heart Disease	411	4,358	1,069,755	406,740	99.4	320,049
Angina Pectoris	413	5,321	920,395	418,231	99.3	325,409
Other Forms of Chronic Ischemic Heart Disease	414	30,888	5,779,593	2,486,801	99.1	1,927,218
Other Diseases of Endocardium	424	7,194	1,476,354	600,180	99.0	469,735
Cardiac Dysrhythmias	427	31,108	2,746,829	1,376,500	98.8	1,071,206
Heart Failure	428	25,425	2,541,269	1,435,437	99.3	1,125,594
Ill-Defined Descriptions and Complications of Heart Disease	429	4,955	394,639	183,245	98.6	140,637
Acute, But Ill-Defined, Cerebrovascular Disease	436	9,461	1,145,086	720,353	99.1	564,494
Diseases of the Respiratory System (MDC 8)	460-519	110,182	10,172,201	6,141,197	99.3	4,727,623
Acute Bronchitis and Bronchiolitis	466	4,647	279,210	196,257	97.7	135,035
Allergic Rhinitis	477	16,349	269,319	206,829	97.1	151,510
Pneumonia, Organism Unspecified	486	8,992	824,767	493,892	99.3	386,022
Asthma	493	8,260	580,993	379,236	99.0	287,959
Other Diseases of Lung	518	10,353	1,304,592	724,092	99.6	573,316
Diseases of the Digestive System (MDC 9)	520-579	35,670	7,068,730	3,063,907	99.1	2,384,283
Diseases of the Genitourinary System (MDC 10)	580-629	72,992	7,825,845	3,907,244	99.2	3,056,770
Chronic Renal Failure	585	22,420	2,511,305	1,317,745	99.9	1,045,488
Calculus of Kidney and Ureter	592	1,586	351,317	124,680	99.3	97,391
Other Disorders of Urethra and Urinary Tract	599	16,051	981,320	522,232	99.2	413,218
Hyperplasia of Prostate	600	6,527	622,897	319,466	98.9	247,327
Diseases of the Skin and Subcutaneous Tissue (MDC 12)	680-709	45,185	3,118,796	2,074,682	98.2	1,555,489
Other Dermatoses	702	18,646	822,703	600,715	97.3	443,718
Chronic Ulcer of Skin	707	6,150	826,557	475,972	99.5	373,080

See footnotes at end of table.

Table 63—Continued

**Services, Submitted and Allowed Charges, and Program Payments for Medicare Physician and Supplier Services, by Principal  
Diagnosis Within Major Diagnostic Classifications (MDCs): Calendar Year 2001**

Principal ICD-9-CM <sup>1</sup> Diagnosis Within MDC	ICD-9-CM Code	Services in Thousands	Submitted Charges in Thousands	Allowed Charges		Program Payments in Thousands
				Amount in Thousands	Percent of Charges Assigned	
Diseases of the Musculoskeletal System and Connective Tissue (MDC 13)	710-739	136,759	\$15,409,746	\$7,828,665	97.8	\$6,006,736
Rheumatoid Arthritis and Other Inflammatory Polyarthrophathies	714	7,699	612,279	402,703	98.2	312,266
Osteoarthritis and Allied Disorders	715	21,462	3,352,317	1,657,987	98.6	1,277,425
Other and Unspecified Arthropathies	716	3,407	288,032	171,968	98.0	129,457
Other and Unspecified Disorders of Joint	719	19,135	1,360,255	749,460	98.7	573,143
Other and Unspecified Disorders of Back	724	20,577	2,814,901	1,267,730	98.3	977,874
Peripheral Entesopathies and Allied Syndromes	726	9,093	649,812	389,701	98.7	294,529
Other Disorders of Soft Tissues	729	9,132	738,062	403,216	98.4	305,648
Non-Allopathic Lesions, Not Elsewhere Classified	739	11,535	429,684	374,388	83.4	277,535
Congenital Anomalies (MDC 14)	740-759	2,029	398,676	181,420	98.6	140,398
Symptoms, Signs, and Ill-Defined Conditions (MDC 16)	780-799	150,015	16,372,039	8,427,895	99.0	6,557,525
General Symptoms	780	31,869	3,273,439	1,768,413	98.8	1,388,884
Symptoms Involving Respiratory System and Other Chest Symptoms	786	45,674	4,973,711	2,511,562	98.8	1,943,319
Symptoms Involving Digestive System	787	10,910	1,280,038	685,768	99.4	536,730
Symptoms Involving Urinary System	788	8,350	620,357	340,033	98.9	262,878
Sudden Death, Cause Unknown	798	15	2,850	1,526	99.2	1,166
Other Ill-Defined and Unknown Causes of Morbidity and Mortality	799	3,191	373,662	224,781	99.3	178,380
Injury and Poisoning (MDC 17)	800-999	46,006	7,415,898	3,554,306	98.7	2,767,704
Fracture of Neck of Femur	820	4,254	1,216,151	531,937	99.4	420,402
Supplementary Classification of Factors Influencing Health Status and Contact With Health Services	V01-V82	98,351	4,472,475	2,388,153	97.2	1,932,373
Need for Prophylactic Vaccination and Inoculation Against Certain Viral Diseases	V04	21,642	210,328	121,965	99.0	120,849
Special Investigations and Examinations	V72	5,744	225,803	104,871	98.6	86,040

<sup>1</sup>ICD-9-CM is *International Classification of Diseases, 9th Revision, Clinical Modification*. Only the first listed or principal diagnosis has been used.

<sup>2</sup>Specific diagnostic categories were selected for presentation based on amount of allowed charges.

NOTES: Numbers may not add to totals because of rounding. MDCs 11 {Complications of Pregnancy, Childbirth, and the Puerperium (630-676)} and 15 {Certain Conditions Originating in the Perinatal Period (780-799)} were not shown separately (but are included in the totals) because these diagnostic conditions are, for the most part, not applicable to Medicare beneficiaries.

E Codes {Supplementary Classifications of External Causes of Injury and Poisoning (E800-E999)} are also not broken out separately. Medicare program payments represent fee-for-service only.

Due to differences in timing and edits, the physician/supplier claims included in this table will cause the number of services and associated charges and payments to differ slightly from other tables on Medicare physician/supplier utilization.

SOURCE: Centers for Medicare & Medicaid Services, Office of Information Services: Data from the Medicare Decision Support Access Facility; data development by the Office of Research, Development, and Information.