

Table 10.2

**Covered Charges for Hospital Outpatient Services Under Medicare, by Demographic Characteristics,  
Type of Entitlement, and Type of Service: Calendar Year 2004**

Demographic Characteristic and Type of Entitlement	Type of Service				
	Total	Clinic	Emergency Room	Laboratory	Radiology
Covered Charges in Thousands					
Total	\$138,009,804	\$1,799,623	\$5,437,726	\$14,841,980	\$26,218,394
<b>Sex</b>					
Male	64,048,748	752,232	2,249,340	6,347,422	11,465,015
Female	73,961,055	1,047,391	3,188,385	8,494,558	14,753,378
<b>Race<sup>2</sup></b>					
White	105,545,838	1,226,373	4,176,173	12,267,046	22,040,812
Other	31,998,819	566,031	1,242,784	2,515,405	4,070,627
<b>Type of Entitlement</b>					
Aged <sup>3</sup>	103,366,186	1,338,652	3,818,504	11,825,640	22,246,655
Disabled <sup>4</sup>	34,643,617	460,971	1,619,221	3,016,340	3,971,738
Percent Distribution					
Total	100.0	1.3	3.9	10.8	19.0
<b>Sex</b>					
Male	100.0	1.2	3.5	9.9	17.9
Female	100.0	1.4	4.3	11.5	19.9
<b>Race<sup>2</sup></b>					
White	100.0	1.2	4.0	11.6	20.9
Other	100.0	1.8	3.9	7.9	12.7
<b>Type of Entitlement</b>					
Aged <sup>3</sup>	100.0	1.3	3.7	11.4	21.5
Disabled <sup>4</sup>	100.0	1.3	4.7	8.7	11.5

See footnotes at end of table.

**Table 10.2—Continued**

**Covered Charges for Hospital Outpatient Services Under Medicare, by Demographic Characteristics,  
Type of Entitlement, and Type of Service: Calendar Year 2004**

Type of Service					
Pharmacy	Physical Therapy	Medical/ Surgical Supplies	Operating Room	End Stage Renal Disease	Other <sup>1</sup>
Covered Charges in Thousands					
\$4,714,722	\$2,792,898	\$9,352,151	\$13,781,002	\$14,777,216	\$44,294,086
2,138,030	1,059,046	4,700,028	6,190,388	7,925,783	21,221,461
2,576,692	1,733,852	4,652,123	7,590,614	6,851,432	23,072,624
3,922,518	2,382,706	7,873,834	11,516,607	7,345,381	32,794,381
775,426	400,243	1,443,936	2,210,734	7,410,109	11,363,519
3,703,889	2,334,050	7,669,263	11,293,170	7,397,664	31,738,694
1,010,833	458,848	1,682,888	2,487,832	7,379,551	12,555,392
Percent Distribution					
3.4	2.0	6.8	10.0	10.7	32.1
3.3	1.7	7.3	9.7	12.4	33.1
3.5	2.3	6.3	10.3	9.3	31.2
3.7	2.3	7.5	10.9	7.0	31.1
2.4	1.3	4.5	6.9	23.2	35.5
3.6	2.3	7.4	10.9	7.2	30.7
2.9	1.3	4.9	7.2	21.3	36.2

**Table 10.2—Continued**

**Covered Charges for Hospital Outpatient Services Under Medicare, by Demographic Characteristics, Type of Entitlement, and Type of Service: Calendar Year 2004**

Demographic Characteristic and Type of Entitlement	Type of Service				
	Total	Clinic	Emergency Room	Laboratory	Radiology
Total	\$4,093	\$53	Average Charge per Enrollee <sup>5</sup>		\$778
			\$161	\$440	
<b>Sex</b>					
Male	4,391	52	154	435	786
Female	3,866	55	167	444	771
<b>Race<sup>2</sup></b>					
White	3,693	43	146	429	771
Other	6,297	111	245	495	801
<b>Type of Entitlement</b>					
Aged <sup>3</sup>	3,638	47	134	416	783
Disabled <sup>4</sup>	6,537	87	306	569	749

<sup>1</sup>Includes charges for blood, blood administration, cardiology, ambulatory surgical care, magnetic resonance imaging, drugs requiring specific identification, etc.

<sup>2</sup>Excludes unknown race.

<sup>3</sup>Includes aged persons with end stage renal disease (ESRD).

<sup>4</sup>Includes disabled persons with ESRD and persons entitled to Medicare because of ESRD only.

<sup>5</sup>Medicare 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,  
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Pharmacy	Physical Therapy	Type of Service			
		Medical/ Surgical Supplies	Operating Room	End Stage Renal Disease	Other <sup>1</sup>
		Average Charge per Enrollee <sup>5</sup>			
\$140	\$83	\$277	\$409	\$438	\$1,314
147	73	322	424	543	1,455
135	91	243	397	358	1,206
137	83	276	403	257	1,147
153	79	284	435	1,458	2,236
130	82	270	397	260	1,117
191	87	318	469	1,392	2,369