

**Table 9.4**  
**Persons Served, Services, Submitted and Allowed Charges, Program Payments for Medicare Physician and Supplier Services,**  
**by Place of Service: Calendar Year 2009**

Place of Service	Persons Served <sup>1</sup>	Services		Submitted Charges	
		Number in Thousands	Per Person Served <sup>1</sup>	Amount in Thousands	Per Person Served <sup>1</sup>
Total	31,646,640	1,826,304	57.7	\$287,934,772	\$9,098
Office	29,419,760	893,530	30.4	114,453,217	3,890
Home	10,389,380	158,276	15.2	21,986,835	2,116
Inpatient Hospital	7,765,860	195,932	25.2	53,310,062	6,865
Outpatient Hospital <sup>4</sup>	17,272,700	105,632	6.1	29,910,184	1,732
Emergency Room Hospital <sup>4</sup>	10,048,440	43,638	4.3	11,306,078	1,125
Ambulatory Surgical Center	3,610,080	17,643	4.9	22,224,185	6,156
Skilled Nursing Care Facility	2,027,140	24,321	12.0	2,373,683	1,171
Nursing Home	1,948,740	31,989	16.4	2,081,451	1,068
Hospice	7,380	23	3.2	2,711	367
Ambulance <sup>5</sup>	4,586,700	61,471	13.4	9,730,833	2,122
Independent Laboratory	17,522,640	263,075	15.0	15,771,182	900
All Other <sup>6</sup>	NA	30,774	NA	4,784,351	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 2009**

Place of Service	Allowed Charges				Program Payments			
	Amount in Thousands	Percent	Per Person Served <sup>1</sup>	Assigned in Thousands	Percent of Charges Assigned <sup>2</sup>	Amount in Thousands	Percent	Per Person Served <sup>3</sup>
Total	\$117,586,191	100.0	\$3,716	\$116,989,449	99.5	\$91,115,719	100.0	\$2,944
Office	55,325,833	47.1	1,881	54,881,785	99.2	41,722,800	45.8	1,465
Home	12,244,617	10.4	1,179	12,165,767	99.4	9,502,150	10.4	930
Inpatient Hospital	18,381,806	15.6	2,367	18,342,338	99.8	14,548,514	16.0	1,883
Outpatient Hospital <sup>4</sup>	7,786,694	6.6	451	7,766,179	99.7	6,015,945	6.6	358
Emergency Room Hospital <sup>4</sup>	3,206,370	2.7	319	3,203,501	99.9	2,472,235	2.7	251
Ambulatory Surgical Center	5,315,015	4.5	1,472	5,307,285	99.9	4,185,843	4.6	1,161
Skilled Nursing Care Facility	1,575,151	1.3	777	1,574,489	99.9	1,185,031	1.3	594
Nursing Home	1,344,882	1.1	690	1,344,463	99.9	992,793	1.1	516
Hospice	1,490	(7)	202	1,487	99.8	1,127	(7)	156
Ambulance <sup>5</sup>	5,432,527	4.6	1,184	5,432,504	99.9	4,307,761	4.7	940
Independent Laboratory	4,631,535	3.9	264	4,631,116	99.9	4,370,188	4.8	250
All Other <sup>6</sup>	2,340,271	2.0	NA	2,338,535	99.9	1,811,332	2.0	NA

<sup>1</sup>Includes 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.

<sup>2</sup>Ratio of assigned allowed charges to total allowed charges. Includes charges for supplier services.

<sup>3</sup>The average program payment per person served does not reflect beneficiaries who received covered services, but for whom no program payments were reported.

<sup>4</sup>Prior to 1992, emergency room and outpatient hospital data were aggregated.

<sup>5</sup>Excludes air or water services.

<sup>6</sup>Includes 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.

<sup>7</sup>Less 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 Standard Analytical Files; data development by the Office of Research, Development, and Information.