

TABLE 134—CY 2013 PFS FINAL RULE WITH COMMENT PERIOD ESTIMATED IMPACT ON TOTAL ALLOWED CHARGES BY SPECIALTY\*

(A) Specialty	(B) Allowed charges (mil)	(C) Impact of work and MP RVU changes %	(D) Impact of PE RVU changes %	(E) Combined Impact %
TOTAL .....	\$ 86,588	0	0	0
01-ALLERGY/IMMUNOLOGY .....	200	0	3	3
02-ANESTHESIOLOGY** .....	1,923	0	1	1
03-CARDIAC SURGERY .....	369	0	-1	-1
04-CARDIOLOGY .....	6,733	-1	-2	-2
05-COLON AND RECTAL SURGERY .....	153	0	2	2
06-CRITICAL CARE .....	263	0	1	1
07-DERMATOLOGY .....	3,024	0	0	0
08-EMERGENCY MEDICINE .....	2,839	0	0	0
09-ENDOCRINOLOGY .....	437	0	1	1
10-FAMILY PRACTICE .....	5,943	2	4	7
11-GASTROENTEROLOGY .....	1,896	0	0	0
12-GENERAL PRACTICE .....	587	0	1	1
13-GENERAL SURGERY .....	2,283	0	1	0
14-GERIATRICS .....	220	1	3	5
15-HAND SURGERY .....	135	0	1	1
16-HEMATOLOGY/ONCOLOGY .....	1,909	0	2	2
17-INFECTIOUS DISEASE .....	629	0	1	1
18-INTERNAL MEDICINE .....	11,163	2	3	4
19-INTERVENTIONAL PAIN MGMT .....	539	0	1	1
20-INTERVENTIONAL RADIOLOGY .....	204	0	-2	-3
21-MULTISPECIALTY CLINIC/OTHER PHY .....	81	0	0	-1
22-NEPHROLOGY .....	2,080	0	0	0
23-NEUROLOGY .....	1,604	-2	-5	-7
24-NEUROSURGERY .....	687	0	0	0
25-NUCLEAR MEDICINE .....	49	0	-2	-3
27-OBSTETRICS/GYNECOLOGY .....	704	0	0	0
28-OPHTHALMOLOGY .....	5,645	-3	0	-3
29-ORTHOPEDIC SURGERY .....	3,643	0	0	0
30-OTOLARNGOLOGY .....	1,076	0	2	2
31-PATHOLOGY .....	1,210	0	-6	-6
32-PEDIATRICS .....	65	1	3	3
33-PHYSICAL MEDICINE .....	999	-1	-3	-4
34-PLASTIC SURGERY .....	356	-1	1	1
35-PSYCHIATRY .....	1,170	-1	3	2
36-PULMONARY DISEASE .....	1,703	0	1	1
* 37-RADIATION ONCOLOGY .....	1,988	0	-7	-7*
38-RADIOLOGY .....	4,818	0	-3	-3
39-RHEUMATOLOGY .....	548	0	0	0
40-THORACIC SURGERY .....	343	0	-1	-1
41-UROLOGY .....	1,918	0	-1	-1
42-VASCULAR SURGERY .....	888	0	-2	-2
43-AUDIOLOGIST .....	57	0	-4	-4
44-CHIROPRACTOR .....	746	0	1	1
45-CLINICAL PSYCHOLOGIST .....	575	1	-3	-2
46-CLINICAL SOCIAL WORKER .....	406	1	-3	-2
47-DIAGNOSTIC TESTING FACILITY .....	888	0	-7	-7
48-INDEPENDENT LABORATORY .....	1,073	0	-14	-14
49-NURSE ANES/ANES ASST** .....	1,104	0	1	1
50-NURSE PRACTITIONER .....	1,623	1	3	4
51-OPTOMETRY .....	1,061	-1	1	1
52-ORAL/MAXILLOFACIAL SURGERY .....	45	0	1	1
53-PHYSICAL/OCCUPATIONAL THERAPY .....	2,636	0	4	4
54-PHYSICIAN ASSISTANT .....	1,229	1	2	3
55-PODIATRY .....	1,925	0	2	2
56-PORTABLE X-RAY SUPPLIER .....	106	0	5	5
* 57-RADIATION THERAPY CENTERS .....	72	0	-9	-9*
98-OTHER .....	19	0	1	1

\* Table 83 shows only the proposed payment policy impact on PFS services. We note that these impacts do not include the effects of the negative January 2013 conversion factor change under current law.

\*\* These figures have been revised to correct errors in the calculations presented in the CY 2013 PFS proposed rule.

The following is an explanation of the information represented in Table 134:

- *Column A (Specialty)*: The Medicare specialty code as reflected in our physician/supplier enrollment files.

- *Column B (Allowed Charges)*: The aggregate estimated PFS allowed charges for the specialty based on CY 2011 utilization and CY 2012 rates. That is, allowed charges are the PFS amounts for covered services and include coinsurance and deductibles (which are the financial responsibility of the beneficiary). These amounts have been summed across all services furnished by physicians, practitioners, and suppliers within a specialty to arrive at the total allowed charges for the specialty.

- *Column C (Impact of Work and Malpractice (MP) RVU Changes)*: This column shows the estimated CY 2013 impact on total allowed charges of the changes in the work and malpractice RVUs, including the impact of changes due to potentially misvalued codes.

- *Column D (Impact of PE RVU Changes)*: This column shows the estimated CY 2013 impact on total allowed charges of the changes in the PE RVUs.

- *Column E (Combined Impact)*: This column shows the estimated CY 2013 combined impact on total allowed charges of all the changes in the previous columns.